

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 264138

Entity Name: HUTCHEON ENGINEERS, INC.**Current Principal Place of Business:**3001 WESTON PARKWAY
CARY, NC 27513**Current Mailing Address:**P.O. BOX 33068
RALEIGH, NC 27636**FEI Number:** 59-0997728**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CHAIRMAN, DIRECTOR
Name WILSON, MARK S
Address 3001 WESTON PARKWAY
City-State-Zip: CARY NC 27513

Title VP, SECRETARY
Name COOK, RICHARD N
Address 3001 WESTON PARKWAY
City-State-Zip: CARY NC 27513

Title DIRECTOR
Name BURNS, GREGORY B
Address 12750 MERIT DRIVE
SUITE 1000
City-State-Zip: DALLAS TX 75251

Title DIRECTOR
Name CAVE, DERRICK B
Address 445 24TH STREET
SUITE 200
City-State-Zip: VERO BEACH FL 32960

Title PRESIDENT, DIRECTOR
Name ATZ, JOHN C
Address 1920 WEKIVA WAY
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33411

Title DIRECTOR
Name BARBER, BARRY L
Address 3001 WESTON PARKWAY
City-State-Zip: CARY NC 27513

Title ASST. SECRETARY, TREASURER
Name MCENTEE, DAVID L
Address 3001 WESTON PARKWAY
City-State-Zip: CARY NC 27513

Title DIRECTOR
Name MURPHY, TERENCE T
Address 11400 COMMERCE PARK DRIVE
SUITE 400
City-State-Zip: RESTON VA 20191

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RICHARD N. COOK**VP, SECRETARY****04/22/2014**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name PEED, BROOKS H
Address 445 24TH AVENUE
SUITE 200
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR
Name SCHILLER, MICHAEL G
Address 7740 N 16TH STREET
SUITE 300
City-State-Zip: PHOENIX AZ 85020

Title DIRECTOR
Name WILSON, DEBORAH L
Address 2 SUN COURT
SUITE 450
City-State-Zip: NORCROSS GA 30092

Title DIRECTOR
Name PENNY, H D
Address 3001 WESTON PARKWAY
City-State-Zip: CARY NC 27513

Title DIRECTOR
Name SQUIRES, CHRISTOPHER A
Address 3001 WESTON PARKWAY
City-State-Zip: CARY NC 27513

Title DIRECTOR
Name TRIBBLE, G B
Address 2201 WEST ROYAL LANE
SUTIE 275
City-State-Zip: IRVING TX 75063