

2014 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F96000004326

Entity Name: C & S ENGINEERS, INC.**Current Principal Place of Business:**499 COL. EILEEN COLLINS BLVD.
SYRACUSE, NY 13212**Current Mailing Address:**499 COL. EILEEN COLLINS BLVD.
SYRACUSE, NY 13212**FEI Number:** 13-5318940**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH, LTD., INC.
1550 OFFICE PLAZA DR
TALLAHASSEE, FL 32301 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 DVP
Name DUCLOS, ROBERT N
Address 8186 TROLLEYS END
City-State-Zip: CICERO NY 13039

Title VP
Name MACMURRAY, ORRIN B
Address 8311 DIXON RD
City-State-Zip: CAMDEN NY 13316

Title DV
Name PECKHAM, RONALD L
Address 4018 PAWNEE RD
City-State-Zip: LIVERPOOL NY 13090

Title DV
Name SPINA, JOHN F
Address 7408 BAY CHAPEL CIRCLE
City-State-Zip: LIVERPOOL NY 13088

Title DP
Name TRIMBLE, JOHN D
Address 1635 CO, RTE. 45
City-State-Zip: FULTON NY 13069

Title DIRECTOR, TREASURER
Name CLEGG, MAUREEN K
Address 499 COL. EILEEN COLLINS BLVD.
City-State-Zip: SYRACUSE NY 13212

Title VP, DIRECTOR
Name HOTALING, MICHAEL D
Address 2020 CAMINO DEL RIO N. SUITE 1000
City-State-Zip: SAN DIEGO CA 92108

Title DIRECTOR, SECRETARY
Name WENHAM, MATTHEW J
Address 20445 EMERALD PARKWAY
SUITE 100
City-State-Zip: CLEVELAND OH 44135

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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: JOHN D. TRIMBLE**PRESIDENT****10/21/2014**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. VICE PRESIDENT
Name CLARK, BRIAN W.
Address 605 E. ROBINSON ST.
SUITE 210
City-State-Zip: ORLANDO FL 32801

Title ASST. SECRETARY
Name SMITH, JENNIFER T
Address 499 COL. EILEEN COLLINS BLVD.
City-State-Zip: SYRACUSE NY 13212

Title ASST. SECRETARY
Name KOLLER, ROBERT J
Address 38777 SIX MILE ROAD
SUITE 202
City-State-Zip: LIVONIA MI 48152

Title ASST. TREASURER
Name LAWLER, AMY S
Address 499 COL. EILEEN COLLINS BLVD.
City-State-Zip: SYRACUSE NY 13212