

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000000948

**Entity Name:** AMEC PROGRAMS, INC.**Current Principal Place of Business:**2475 NORTHWINDS PARKWAY - SUITE 200-260  
ALPHARETTA, GA 30009**Current Mailing Address:**1105 LAKEWOOD PARKWAY SUITE 300  
ALPHARETTA, GA 30009 US**FEI Number:** 95-2699729**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**C T 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	DPT
Name	LIPUMA, TERRENCE A
Address	11103 LOCHINVER LANE
City-State-Zip:	OAKTON VA 22124

Title	SFSO
Name	WILEY, MICHAEL
Address	4175 AVONDALE LANE
City-State-Zip:	CUMMING GA 30041

Title	D
Name	ANDERSON, SCOTT J
Address	9417 BELMONT LANE
City-State-Zip:	WAXHAW NC 28173

Title	D
Name	OTT, DAVID E
Address	359 153RD AVENUE
City-State-Zip:	SOMERSET WI 54025

Title	D
Name	TURTON, THOMAS
Address	800 A STREET, SE
City-State-Zip:	WASHINGTON DC 20003

Title	D
Name	GALLEN, ROBERT M
Address	4430 38TH STREET, SOUTH
City-State-Zip:	ST. PETERSBURG FL 33711

*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:** TERRENCE A. LIPUMA**PRESIDENT****04/30/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date