

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006484

Entity Name: ARSEE ENGINEERS, INC.

FILED  
Feb 11, 2011  
Secretary of State

**Current Principal Place of Business:**

9715 KINCAID DRIVE  
SUITE 100  
FISHERS, IN 46037959 US

**New Principal Place of Business:**

**Current Mailing Address:**

9715 KINCAID DRIVE  
SUITE 100  
FISHERS, IN 46037959 US

**New Mailing Address:**

FEI Number: 35-1611580

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: TREA  
Name: PULLEY, ALLEN R  
Address: 9715 KINCAID DRIVE, SUITE 100  
City-St-Zip: FISHERS, IN 460379459

Title: DIR  
Name: SEEST, JOHN A  
Address: 9715 KINCAID DRIVE, SUITE 100  
City-St-Zip: FISHERS, IN 460379459

Title: PRES  
Name: HERGET, FREDERICK A  
Address: 9715 KINCAID DRIVE, SUITE 100  
City-St-Zip: FISHERS, IN 460379459

Title: SEC  
Name: JONES, SCOTT A  
Address: 9715 KINCAID DRIVE, SUITE 100  
City-St-Zip: FISHERS, IN 460379459

Title: DIR  
Name: PENSINGER, KENNETH L  
Address: 9715 KINCAID DRIVE, SUITE 100  
City-St-Zip: FISHERS, IN 460379459

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: ALLEN R PULLEY

TREA

02/11/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date