

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000003196

**FILED**  
**Jan 13, 2017**  
**Secretary of State**  
**CC3018283121**

**Entity Name:** GEIGER GOSSEN HAMILTON CAMPBELL ENGINEERS P.C.,  
CO.

**Current Principal Place of Business:**

2 EXECUTIVE BLVD.  
SUITE 309  
SUFFERN, NY 10901

**Current Mailing Address:**

2 EXECUTIVE BLVD.  
SUITE 309  
SUFFERN, NY 10901 US

**FEI Number: 13-3472064**

**Certificate of Status Desired: No**

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

CSC  
1201 HAYS STREET  
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            PTD  
Name            CAMPBELL, DAVID  
Address        2 EXECUTIVE BLVD. #309  
City-State-Zip: SUFFERN NY 10901

Title            S  
Name            EMERY, STEPHEN  
Address        2 EXECUTIVE BLVD. #410  
City-State-Zip: SUFFERN NY 10901

Title            TREASURER  
Name            LYNCH, KAREN  
Address        2 EXECUTIVE BLVD.  
                  SUITE 309  
City-State-Zip: SUFFERN NY 10901

Title            DIRECTOR  
Name            MACBAIN, KEITH  
Address        2 EXECUTIVE BLVD.  
                  SUITE 309  
City-State-Zip: SUFFERN NY 10901

*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: DAVID CAMPBELL**

**PRESIDENT**

**01/13/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date