

1.) CORPORATION NAME:

**Anderson Engineering, Inc.**

DUE DATE: **2/28/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

SCC ID NO: **F1575523**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	600

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MO**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2045 W WOODLAND

CITY/ST/ZIP: SPRINGFIELD, MO 65807

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: NEIL S BRADY TITLE: PRESIDENT ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MD 65807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JERROD HOGAN TITLE: PRESIDENT ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: LARRY E DAVIS TITLE: VICE PRESIDENT ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: PAUL ENGEL TITLE: VICE PRESIDENT ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: KEVN LAMBETH TITLE: VICE PRESIDENT ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOHN SNIDER TITLE: VICE PRESIDENT ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: SHELIA STANFIELD TITLE: TREASURER ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: STEVEN L BRADY TITLE: CEO ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KEVIN SPRENKLE TITLE: VICE PRESIDENT ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JASON ECKHART TITLE: VICE PRESIDENT ADDRESS: 2045 W WOODLAND CITY/ST/ZIP/CO: SPRINGFIELD, MO 65807	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ SHELIA STANFIELD	SHELIA STANFIELD, TREASURER	1/24/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		