

1.) CORPORATION NAME:

DUE DATE: **3/31/2014**

**Barr Engineering Co.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1782715**

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	125,000
COMBNV	125,000
OTH	500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**MN**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4700 W 77TH ST

CITY/ST/ZIP: MINNEAPOLIS, MN 55435

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: WILLIAM FORSMARK TITLE: VP/SECRETARY ADDRESS: 4700 W 77TH ST CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55435</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: GREGORY D KEIL TITLE: COO,VP ADDRESS: 4700 W 77TH ST CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55435</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: DOUGLAS E CONNELL TITLE: VICE PRESIDENT ADDRESS: 4700 W 77TH ST CITY/ST/ZIP/CO: MINNEAPOLIS, MN 55435</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: John T Lee TITLE: PRESIDENT ADDRESS: 4700 W 77th St CITY/ST/ZIP/CO: Minneapolis, MN 55435</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Nancy Dent TITLE: VICE PRESIDENT ADDRESS: 332 West Superior St #600 CITY/ST/ZIP/CO: Duluth, MN 55802</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Richard Hardegger TITLE: VICE PRESIDENT ADDRESS: 500 - 808 4th Ave SW CITY/ST/ZIP/CO: Calgary, AB T2P 3E8, CA</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: James R Langseth TITLE: VICE PRESIDENT ADDRESS: 500 - 808 4th Ave SW CITY/ST/ZIP/CO: Calgary, AB T2P 3E8, CA	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: Dale W Finnesgaard TITLE: VICE PRESIDENT ADDRESS: 4700 W 77th St CITY/ST/ZIP/CO: Minneapolis, MN 55435	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ GREGORY D KEIL	GREGORY D KEIL, COO,VP	3/7/2014
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.