

1.) CORPORATION NAME:

**GRL Engineers, Inc.**

DUE DATE: **3/31/2012**

SCC ID NO: **F1817040**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**NATIONAL CORPORATE RESEARCH, LTD.**

**250 BROWNS HILL COURT**

**MIDLOTHIAN, VA 23114**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**CHESTERFIELD COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**OH**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 30725 AURORA ROAD

CITY/ST/ZIP: CLEVELAND, OH 44139-

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.

NAME: PATRICK J HANNIGAN  
TITLE: PRESIDENT  
ADDRESS: 30725 AURORA ROAD  
CITY/ST/ZIP/CO: CLEVELAND, OH 44139-

OFFICER

DIRECTOR

NAME: MOHAMAD HUSSEIN  
TITLE: VICE PRESIDENT  
ADDRESS: 8000 S ORANGE AVE SUITE 225  
CITY/ST/ZIP/CO: ORLANDO, FL 32809-

OFFICER

DIRECTOR

NAME: GARLAND E LIKINS  
TITLE: SEN VP  
ADDRESS: 30725 AURORA ROAD  
CITY/ST/ZIP/CO: CLEVELAND, OH 44139-

OFFICER

DIRECTOR

NAME: GEORGE PISCSALKO  
TITLE: VICE PRESIDENT  
ADDRESS: 30725 AURORA ROAD  
CITY/ST/ZIP/CO: CLEVELAND, OH 44139-

OFFICER

DIRECTOR

NAME: CAMILO ALVAREZ  
TITLE: VICE PRESIDENT  
ADDRESS: 516 CRANE BLVD.  
CITY/ST/ZIP/CO: LOS ANGELES, CA 90065-

OFFICER

DIRECTOR

NAME: C. MICHAEL MORGANO TITLE: VICE PRESIDENT ADDRESS: 30725 AURORA ROAD CITY/ST/ZIP/CO: CLEVELAND, OH 44139-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: SCOTT D WEBSTER TITLE: VICE PRESIDENT ADDRESS: 9912 COLVARD CIRCLE CITY/ST/ZIP/CO: CHARLOTTE, NC 28269-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: ADRIAN RAUSCHE TITLE: TREASURER ADDRESS: 30725 AURORA ROAD CITY/ST/ZIP/CO: CLEVELAND, OH 44139-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: FRANK RAUSCHE TITLE: DIRECTOR ADDRESS: 30725 AURORA ROAD CITY/ST/ZIP/CO: CLEVELAND, OH 44139-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: BRENT R ROBINSON TITLE: DIRECTOR ADDRESS: 30725 AURORA ROAD CITY/ST/ZIP/CO: CLEVELAND, OH 44139-	<input 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/ ADRIAN RAUSCHE _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ADRIAN RAUSCHE, TREASURER _____ PRINTED NAME AND CORPORATE TITLE	2/10/2012 _____ 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.		