

1.) CORPORATION NAME:

Engineering Design & Testing Corporation

DUE DATE: **2/11/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1917063**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMAV	800,000
COMCNV	200,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

SC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO Box 8027

CITY/ST/ZIP: Columbia, SC 29202

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:	GLENN STEWART ME PE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 8027		
CITY/ST/ZIP/CO:	COLUMBIA, SC 29202		

NAME:	TIM A JUR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	POST OFFICE BOX 8027		
CITY/ST/ZIP/CO:	COLUMBIA, SC 29202		

NAME:	LAURA J FRIENDLY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	POST OFFICE BOX 8027		
CITY/ST/ZIP/CO:	COLUMBIA, SC 29202		

NAME:	STEVEN W MORRIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 668565		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28266		

NAME:	SCOBEE WOOLWINE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	POST OFFICE BOX 668565		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28266		

NAME:	THOMAS P JUR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	POST OFFICE BOX 5126		
CITY/ST/ZIP/CO:	CONCORD, CA 94524		

NAME: JOHN A WORSHAM TITLE: DIRECTOR ADDRESS: PO BOX 610406 CITY/ST/ZIP/CO: BIRMINGHAM, AL 35261	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: DAVID L HANKS TITLE: DIRECTOR ADDRESS: POST OFFICE BOX 40026 CITY/ST/ZIP/CO: OVERLAND PARK, KS 66204	<input 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/ LAURA JFRIENDLY	LAURA JFRIENDLY,	2/11/2013
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.