

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2002 8:00 am
Secretary of State

04-10-2002 90443 019 ***150.00

DOCUMENT # 807019

1. Entity Name

MCDERMOTT INCORPORATED

Principal Place of Business

**1450 POYDRAS STREET
NEW ORLEANS LOUISIANA 70112**

Mailing Address

**C/O TAX DEPT.
P.O. BOX 60035
NEW ORLEANS LA 70160
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

74-1032246

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

SEE ATTACHED LISTING

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **HENZLER, T. A.**
CITY-ST-ZIP **1450 POYDRAS STREET
NEW ORLEANS LA 70112**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **JOLLIFF, R. A.**
CITY-ST-ZIP **1450 POYDRAS STREET
NEW ORLEANS LA 70112**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **AS**
STREET ADDRESS **STUMPF, R.E.**
CITY-ST-ZIP **1450 POYDRAS ST
NEW ORLEANS LA 70112**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **EVGC**
STREET ADDRESS **NESSER, J. T.**
CITY-ST-ZIP **1450 POYDRAS STREET
NEW ORLEANS LA 70112**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **AS**
STREET ADDRESS **HINRICHS, EIANE**
CITY-ST-ZIP **1450 POYDRAS STREET
NEW ORLEANS LA 70112**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME **P**
STREET ADDRESS **WOMACK, E. A.**
CITY-ST-ZIP **MT. ATHOS RD, RTE 726
LYNCHBURG VA 24504**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **2016 Mt. Athos Rd.**
CITY-ST-ZIP **Lynchburg, VA 24504**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *F. A. Henzler* REQUIRED-A. Henzler, V.P., Finance 03/28/02 (504) 587-4411

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

OFFICERS AND DIRECTORS LISTING OF
MCDERMOTT INCORPORATED

NAME

E.A. Womack
President

F.S. Kalman
Executive Vice President and Chief Financial
Officer

J.T. Nesser
Executive Vice President and General Counsel and
Corporate Secretary

L.J. Sannino
Senior Vice President, Human Resources
& Corp. Compliance Director

B.N. Hatton
Vice President and General Manager,
Government Operations

T.A. Henzler
Vice President, Finance and
Corporate Controller

R.A. Joliff
Treasurer

J.W. Brombacher
Assistant Treasurer

Liane K. Hinrichs
Assistant Secretary

R.E. Stumpf
Assistant Secretary

DIRECTORS

E.A. Womack

J.R. Woolsey

D.R. Gaubert

I:\OLISTS\MCD012

BUSINESS ADDRESS

Mt. Athos Rd., Rte 726
Lynchburg, VA 24504

P.O. Box 60035
New Orleans, LA 70160

P.O. Box 60035
New Orleans, LA 70160

P.O. Box 60035
New Orleans, LA 70160

1525 Wilson Blvd., Ste 100
Arlington, VA 22209

P.O. Box 60035
New Orleans, LA 70160

P.O. Box 60035
New Orleans, LA 70160

P.O. Box 60035
New Orleans, LA 70160

P.O. Box 60035
New Orleans, LA 70160

P.O. Box 60035
New Orleans, LA 70160

2016 Mount Athos Rd.
Lynchburg, VA 24504

2016 Mount Athos Rd.
Lynchburg, VA 24504

P.O. Box 60035
New Orleans, LA 70160

RESIDENCE ADDRESS

401 St. Andrew Circle
Lynchburg, VA 24503

825 Lafayette St #7
New Orleans, LA 70113

200 Fairway Drive
New Orleans, LA 70124

640 Tchoupitoulas St
New Orleans, LA 70130

3404 Saylor Place
Alexandria, VA 22304

26 Belle Grove Drive
Destrehan, LA 70047

3 Patricia Court
Luling, LA 70070

121 N. Livingston Place
Metairie, LA 70005

1415 Webster
New Orleans, LA 70118

55 Yosemite Drive
New Orleans, LA 70131

401 St. Andrew Circle
Lynchburg, VA 24503

4939 Mt Laurel Dr
Lynchburg, VA 24503

18 Muirfield Place
New Orleans, LA 70131

Attachment

#87019

B000B232