

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90020 026 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 815410
 1. Corporation Name
DELTA HUDSON ENGINEERING CORPORATION

Principal Place of Business 801 N. ELEDRIDGE ST. P. O. BOX 218218 HOUSTON TX 77218 US	Mailing Address C/O TAX DEPT. P. O. BOX 60035 NEW ORLEANS LA 70160 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Country 25	Zip 29
Country 30	Country 30

3. Date Incorporated or Qualified 07/05/1961	Applied For Not Applicable
4. FEI Number 74-0698041	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

TITLE	T	<input type="checkbox"/> DELETE
NAME	JOLLIFF, R A	
STREET ADDRESS	1450 POYDRAS ST.	
CITY-ST-ZIP	NEW ORLEANS LA	
TITLE	S	<input type="checkbox"/> DELETE
NAME	TSAI, J. S.	
STREET ADDRESS	1450 POYDRAS ST	
CITY-ST-ZIP	NEW ORLEANS, LA 00000	
TITLE	V	<input type="checkbox"/> DELETE
NAME	HENZLER, T A	
STREET ADDRESS	1450 POYDRAS STREET	
CITY-ST-ZIP	NEW ORLEANS LA	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	WOOLBERT D, R	
STREET ADDRESS	1450 POYDRAS ST	
CITY-ST-ZIP	NEW ORLEANS LA	
TITLE	VPCF	<input type="checkbox"/> DELETE
NAME	GAUBERT, D R	
STREET ADDRESS	1450 POYDRAS ST	
CITY-ST-ZIP	NEW ORLEANS LA	
TITLE	P	<input type="checkbox"/> DELETE
NAME	RALSTON, P E	
STREET ADDRESS	8500 MACLEOD TRAIL, #400 S	
CITY-ST-ZIP	CALGARY AL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SEE ATTACHED LISTING	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Assistant Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Stumof, R.E.	
5.3 STREET ADDRESS	1450 Poydras Street	
5.4 CITY-ST-ZIP	New Orleans, LA 70112	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: T.A. Henzler T.A. Henzler 04/1/99 (504) 587-4411
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR V.P.-Tax Admin. Date Daytime Phone #

As of 03/09/99

475763-90020-26
815410

DELTA HUDSON ENGINEERING CORPORATION
OFFICERS AND DIRECTORS

OFFICERS

BUSINESS ADDRESS

P.E. Ralston
President

Suite 400S
8500 Macleod Trail South
Calgary, Alberta T2H 2N7

D.R. Gaubert
Senior Vice President and
Chief Financial Officer

1450 Poydras Street
New Orleans, LA 70112

T.A. Henzler
Vice President-
Tax Administration

1450 Poydras Street
New Orleans, LA 70112

R.A. Jolliff
Treasurer

1450 Poydras Street
New Orleans, LA 70112

J.J. Dantonio, Jr.
Assistant Treasurer

801 N. Eldridge Street
Houston, TX 77079

J.S. Tsai
Secretary

1450 Poydras Street
New Orleans, LA 70112

J.J. Hightower
Assistant Secretary

801 N. Eldridge Street
Houston, TX 77079

R.E. Stumpf
Assistant Secretary

1450 Poydras Street
New Orleans, LA 70112

DIRECTORS

D.R. Gaubert

1450 Poydras Street
New Orleans, LA 70112

S.W. Murphy

1450 Poydras Street
New Orleans, LA 70112

E.A. Womack, Jr.

Mt. Athos Road
Route 726
Lynchburg, VA 24506