

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 21, 2002 8:00 am**  
**Secretary of State**

02-21-2002 90167 020 \*\*\*158.75

**DOCUMENT # 833552**

1. Entity Name  
**URS CORPORATION**

Principal Place of Business

**100 CALIFORNIA ST  
 SUITE 500  
 SAN FRANCISCO CA 94111  
 US**

Mailing Address

**100 CALIFORNIA ST  
 SUITE 500  
 SAN FRANCISCO CA 94111  
 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

**94-1716908**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM  
 1200 SOUTH PINE ISLAND ROAD  
 PLANTATION FL 33324**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>STEVENSON, WILLIAM A</b> <b>3950 SPARKS DR SE</b> <b>GRAND RAPIDS MI 49546</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>RICHARDS, MICHAEL C.</b> <b>500 12TH ST, STE 200</b> <b>OAKLAND CA 94607</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SV</b> <b>BISCHOFF, JOHN A.</b> <b>500 12TH ST, STE 200</b> <b>OAKLAND CA 94607</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DEVP</b> <b>AINSWORTH, KENT P</b> <b>100 CALIFORNIA ST STE 500</b> <b>SAN FRANCISCO CA 94111</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V</b> <b>DOYLE, J R</b> <b>4582 SOUTH ULSTER ST., STE 600</b> <b>DENVER CO 80237</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>MILLER, JAMES R.</b> <b>4582 S. ULSTER ST., STE 600</b> <b>DENVER CO 80237</b>	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DSRVP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BIBI E. TUFTS AVE.</b> <b>DENVER, CO 80237</b>	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SRVP</b> <b>500 12TH ST., #200</b> <b>OAKLAND, CA 94607</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:

**WILLIAM A. STEVENSON**  
 ASSISTANT SECRETARY

1-16-02

415-774-2700

Date

Daytime Phone #

CB2E034 (9/01)

- CONTINUED

11. OFFICERS & DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS & DIRECTORS IN 11.	
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	1.1 Title 1.2 Name 1.3 Street Address 1.4 City-State-ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Brummerstedt, Carol 100 California St., Suite 500 San Francisco, CA 94111
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	2.1 Title 2.2 Name 2.3 Street Address 2.4 City-State-ZIP	V/T <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Nelson, David C. 100 California St., Suite 500 San Francisco, CA 94111
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	3.1 Title 3.2 Name 3.3 Street Address 3.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Masters, Joseph 100 California St., Suite 500 San Francisco, CA 94111
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	4.1 Title 4.2 Name 4.3 Street Address 4.4 City-State-ZIP	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Jones, Kristin L. 100 California St., Suite 500 San Francisco, CA 94111
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	5.1 Title 5.2 Name 5.3 Street Address 5.4 City-State-ZIP	SrV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Dhamotharan, Dharmo. 7600 W. Tidwell, Suite 600 Houston, TX 77040
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	6.1 Title 6.2 Name 6.3 Street Address 6.4 City-State-ZIP	SrV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Webb, William D. 5301 77 Center Drive, Suite 41 Charlotte, NC 28217
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	7.1 Title 7.2 Name 7.3 Street Address 7.4 City-State-ZIP	SrV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Gallen, Robert M. 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	8.1 Title 8.2 Name 8.3 Street Address 8.4 City-State-ZIP	SrV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Hawkes, T. Wallace 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	9.1 Title 9.2 Name 9.3 Street Address 9.4 City-State-ZIP	SrV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Logan, Thomas J. 7800 Congress Ave., Suite 200 Boca Raton, FL 33487
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	10.1 Title 10.2 Name 10.3 Street Address 10.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Allison, Jimmie D. 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	11.1 Title 11.2 Name 11.3 Street Address 11.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition de Vivero, Richard 315 E. Robinson St., Suite 245 Orlando, FL 32801
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	12.1 Title 12.2 Name 12.3 Street Address 12.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Echagarrua, Mario 7800 Congress Ave., Suite 200 Boca Raton, FL 33487

Attachment  
 Doc# 833552  
 741581

11. OFFICERS & DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS & DIRECTORS IN 11.	
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	1.1 Title 1.2 Name 1.3 Street Address 1.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Garcia, Carlos 5805 W. 11th St., Suite 340 Miami, FL 33126
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	2.1 Title 2.2 Name 2.3 Street Address 2.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Giovannelli, Ronald 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	3.1 Title 3.2 Name 3.3 Street Address 3.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Kwader, Thomas 3676 Hartsfield Rd. Tallahassee, FL 32303
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	4.1 Title 4.2 Name 4.3 Street Address 4.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition McGucken, Stephen 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	5.1 Title 5.2 Name 5.3 Street Address 5.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Mendes, Diana 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	6.1 Title 6.2 Name 6.3 Street Address 6.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Miller, Hugh W. 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	7.1 Title 7.2 Name 7.3 Street Address 7.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Nardone, Michael 700 South Royal, Ste. 1000 Miami Springs, FL 33166
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	8.1 Title 8.2 Name 8.3 Street Address 8.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Niedoroda, Alan 3676 Hartsfield Road Tallahassee, FL 32303
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	9.1 Title 9.2 Name 9.3 Street Address 9.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Schechter, Andrew 7800 Congress Ave., Suite 200 Boca Raton, FL 33432
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	10.1 Title 10.2 Name 10.3 Street Address 10.4 City-State-ZIP	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Turton, Thomas 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	11.1 Title 11.2 Name 11.3 Street Address 11.4 City-State-ZIP	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Sperato, Michael 7650 W. Courtney Campbell Cswy. Tampa, FL 33607
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	12.1 Title 12.2 Name 12.3 Street Address 12.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition