


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 01, 2004 8:00 am**  
**Secretary of State**

03-01-2004 90026 037 \*\*\*158.75

<b>DOCUMENT # 833552</b>		
1. Entity Name URS CORPORATION		

04012964



01142004 Chg-P CR2E034 (10/03)

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
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2. Principal Place of Business 600 MONTGOMERY ST. Suite, Apt. #, etc. 25TH FLOOR	3. Mailing Address 600 MONTGOMERY ST. Suite, Apt. #, etc. 25TH FLOOR
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City & State SAN FRANCISCO, CA	City & State SAN FRANCISCO, CA	4. FEI Number 94-1716908	Applied For Not Applicable
Zip 94111	Country USA	Zip 94111	Country USA

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH 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	
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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. I am familiar with, and accept the obligations of registered agent.

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

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSRV STEVENSON, WILLIAM A 3950 SPARKS DR SE GRAND RAPIDS, MI 49546 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RICHARDS, MICHAEL C. 500 12TH ST, STE 200 OAKLAND, CA 94607 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1333 BROADWAY, STE 800 OAKLAND, CA 94612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SV BISCHOFF, JOHN A. 500 12TH ST, STE 200 OAKLAND, CA 94607 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1333 BROADWAY, STE 800 OAKLAND, CA 94612
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DEVP AINSWORTH, KENT P 100 CALIFORNIA ST STE 500 SAN FRANCISCO, CA 94111 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition DVCFO AINSWORTH, KENT P. 600 MONTGOMERY ST., 25TH FL. SAN FRANCISCO, CA 94111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DOYLE, J R 8181 E. TUFTS AVE DENVER, CO 80237 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MILLER, JAMES R. 5 STREET GEORGES ROAD 2ND FLOOR OAKLAND, CA 94607 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kristin L. Jones KRISTIN L. JONES, ASST. SECRETARY 1-14-04 415-774-2700  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Attachment

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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSENSTEIN, IRWIN L.	NAME	ROSENSTEIN, IRWIN L.
STREET ADDRESS	One Penn Plaza, Suite 610	STREET ADDRESS	One Penn Plaza, Suite 610
CITY-ST-ZIP	New York, NY 10119	CITY-ST-ZIP	New York, NY 10119
TITLE	S <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRUMMERSTEDT, CAROL	NAME	
STREET ADDRESS	100 California Street, Suite 500	STREET ADDRESS	600 Montgomery Street, 25th Floor
CITY-ST-ZIP	San Francisco, CA 94111	CITY-ST-ZIP	San Francisco, CA 94111
TITLE	EV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEREZ, JEAN-YVES	NAME	
STREET ADDRESS	8181 East Tufts Avenue	STREET ADDRESS	
CITY-ST-ZIP	Denver, CO 80237	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BISHOP, THOMAS W.	NAME	
STREET ADDRESS	50 Fremont St., 24th floor	STREET ADDRESS	600 Montgomery Street, 25th Floor
CITY-ST-ZIP	San Francisco, CA 94105	CITY-ST-ZIP	San Francisco, CA 94111
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DHAMOTHARAN, DHAMO S.	NAME	
STREET ADDRESS	9801 Westheimer, Suite 500	STREET ADDRESS	
CITY-ST-ZIP	Houston, TX 77042	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VANDERVORT, ROBERT	NAME	
STREET ADDRESS	2520 Venture Oaks Way, Suite 250	STREET ADDRESS	
CITY-ST-ZIP	Sacramento, CA 95833	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEER, MICHAEL D.	NAME	
STREET ADDRESS	4 North Park Drive, Suite 300	STREET ADDRESS	
CITY-ST-ZIP	Hunt Valley, MD 21030	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLOOM, MARVIN J.	NAME	
STREET ADDRESS	One Penn Plaza, Suite 610	STREET ADDRESS	
CITY-ST-ZIP	New York, NY 10119	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GALLEN, ROBERT M.	NAME	
STREET ADDRESS	7650 West Courtney Campbell Causeway	STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL 33607	CITY-ST-ZIP	

*Attachment*

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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV HAWKES, T. WALLACE 7650 West Courtney Campbell Causeway Tampa, FL 33607 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV RODENFELS, CHARLES A. 277 West Nationwide Blvd. Columbus, OH 43215 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV TROJAN, EDWARD J. 4 North Park Drive, Suite 300 Hunt Valley, MD 21030 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV AMAN, STEVEN M. 614 East Edna Place Covina, CA 91723 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV BALDWIN P. CLAY 235 Peachtree Street NE, Suite 2000 Atlanta, GA 30303 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 1000 Abernathy Road NE, Suite 900 Atlanta, GA 30328
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV BUTTS, JOHN E. 1501 4th Avenue, Suite 1400 Seattle, WA 98101 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV HOLEMAN, JB 7101 Wisconsin Avenue, Suite 700 Bethesda, MD 20814 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV JANDEGIAN, GARY V. 2520 Venture Oaks Way, Suite 250 Sacramento, CA 95833 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition P JANDEGIAN, GARY V. 600 Montgomery Street, 25th Floor San Francisco, CA 94111
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SrV KHAZAK, VLADIMIR 1501 4th Avenue, Suite 1400 Seattle, WA 98101 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAFAYETTE, WILLIAM P.	NAME	
STREET ADDRESS	One Gateway Center, 13 West	STREET ADDRESS	
CITY-ST-ZIP	Pittsburgh, PA 15222	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LOGAN, THOMAS J.	NAME	
STREET ADDRESS	7800 Congress Avenue, Suite 200	STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33487	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROUSSEL, GUILAINE	NAME	
STREET ADDRESS	500 12th Street, Suite 200	STREET ADDRESS	1333 BROADWAY, STE. 800
CITY-ST-ZIP	Oakland, CA 94607	CITY-ST-ZIP	OAKLAND, CA 94612
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEARSON, E. STEVEN	NAME	
STREET ADDRESS	2020 East First Street, Suite 400	STREET ADDRESS	
CITY-ST-ZIP	Santa Ana, CA 92705	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PINO, DAVID W.	NAME	
STREET ADDRESS	235 Peachtree Street NE, Suite 2000	STREET ADDRESS	1000 Abernathy Road NE, Suite 900
CITY-ST-ZIP	Atlanta, GA 30303	CITY-ST-ZIP	Atlanta, GA 30328
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEDALINO, PETER J.	NAME	
STREET ADDRESS	Mack-Cali Centre II, One Mack Centre Drive	STREET ADDRESS	
CITY-ST-ZIP	Paramus, NJ 07652	CITY-ST-ZIP	
TITLE	VT <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELSON, DAVID C.	NAME	
STREET ADDRESS	100 California Street, Suite 500	STREET ADDRESS	600 Montgomery Street, 25th Floor
CITY-ST-ZIP	San Francisco, CA 94111	CITY-ST-ZIP	San Francisco, CA 94111
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLISON, JIMMIE	NAME	
STREET ADDRESS	315 East Robinson Street, Suite 245	STREET ADDRESS	
CITY-ST-ZIP	Orlando, FL 32801	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	De VIVERO, RICHARD E.	NAME	
STREET ADDRESS	315 East Robinson Street, Suite 245	STREET ADDRESS	
CITY-ST-ZIP	Orlando, FL 32801	CITY-ST-ZIP	

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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ECHAGARRUA, MARIO	NAME	
STREET ADDRESS	7800 Congress Avenue, Suite 200	STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33487	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARCIA, CARLOS	NAME	
STREET ADDRESS	7650 Corporate Center Drive, Suite 400	STREET ADDRESS	
CITY-ST-ZIP	Miami, FL 33126	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NIEDORODA, ALAN	NAME	
STREET ADDRESS	3676 Hartsfield Road	STREET ADDRESS	
CITY-ST-ZIP	Tallahassee, FL 32303	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHECHTER, ANDREW	NAME	
STREET ADDRESS	7800 Congress Avenue, Suite 200	STREET ADDRESS	
CITY-ST-ZIP	Boca Raton, FL 33487	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIOVANNELLI, RONALD F.	NAME	
STREET ADDRESS	7650 West Courtney Campbell Causeway	STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL 33607	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KWADER, THOMAS	NAME	
STREET ADDRESS	3676 Hartsfield Road	STREET ADDRESS	
CITY-ST-ZIP	Tallahassee, FL 32303	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, HUGH W.	NAME	
STREET ADDRESS	7650 West Courtney Campbell Causeway	STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL 33607	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NARDONE, MICHAEL	NAME	
STREET ADDRESS	700 S. Royal Poinciana Blvd., Suite 1000	STREET ADDRESS	7650 Corporate Center Drive, Suite 400
CITY-ST-ZIP	Miami Springs, FL 33126	CITY-ST-ZIP	Miami, FL 33126
TITLE	V <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MASTERS, JOSEPH	NAME	
STREET ADDRESS	100 California Street, Suite 500	STREET ADDRESS	600 Montgomery Street, 25th Floor
CITY-ST-ZIP	San Francisco, CA 94111	CITY-ST-ZIP	San Francisco, CA 94111

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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	V/AS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAHN, LESLIE	NAME	
STREET ADDRESS	8181 East Tufts Avenue	STREET ADDRESS	
CITY-ST-ZIP	Denver, CO 80237	CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, KRISTIN L.	NAME	
STREET ADDRESS	100 California Street, Suite 500	STREET ADDRESS	600 Montgomery Street, 25th Floor
CITY-ST-ZIP	San Francisco, CA 94111	CITY-ST-ZIP	San Francisco, CA 94111
TITLE	AS <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SPERATO, MICHAEL	NAME	
STREET ADDRESS	7650 West Courtney Campbell Causeway	STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL 33607	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	LANG, JOHN W.
STREET ADDRESS		STREET ADDRESS	7800 Congress Avenue, Suite 200
CITY-ST-ZIP		CITY-ST-ZIP	Boca Raton, FL 33487
TITLE	<input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	TURTON, THOMAS
STREET ADDRESS		STREET ADDRESS	7650 West Courtney Campbell Causeway
CITY-ST-ZIP		CITY-ST-ZIP	Tampa, FL 33607