

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90143 034 ***150.00

0631845

DOCUMENT # 856502

1. Entity Name

KIEWIT INDUSTRIAL CO.

Principal Place of Business

**1000 KIEWIT PLAZA
 OMAHA NE 68131**

Mailing Address

**ACCT. OPERATIONS
 1000 KIEWIT PLAZA
 OMAHA NE 68131**

DUU47307



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

47-0647804

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**CT CORPORATION SYSTEM
 1200 S. 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, 2001 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	S	<input checked="" type="checkbox"/> Delete
NAME	ROSENTHAL, RODNEY K	
STREET ADDRESS	1000 KEWIT PLAZA	
CITY-ST-ZIP	OMAHA NE 68131-3374	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	HUGHES, WILLIAM A SR	
STREET ADDRESS	1000 KIEWIT PLAZA	
CITY-ST-ZIP	OMAHA NE 68131-3374	
TITLE	SVP	<input type="checkbox"/> Delete
NAME	DAVIS, WILLIAM E	
STREET ADDRESS	100 KIEWIT PLAZA	
CITY-ST-ZIP	OMAHA NE 68131	
TITLE	SVP	<input type="checkbox"/> Delete
NAME	HYVONEN, CHRIS W	
STREET ADDRESS	1000 KIEWIT PLAZA	
CITY-ST-ZIP	OMAHA NE 68131-3374	
TITLE	T	<input type="checkbox"/> Delete
NAME	BROKKE, GREGORY D	
STREET ADDRESS	1000 KIEWIT PLAZA	
CITY-ST-ZIP	OMAHA NE 68131	
TITLE	SVP	<input type="checkbox"/> Delete
NAME	MILLER, PETER W	
STREET ADDRESS	1000 KIEWIT PLAZA	
CITY-ST-ZIP	OMAHA NE 68131	

TITLE	SECRETARY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREGORY D. BROKKE	
STREET ADDRESS	1000 KIEWIT PLAZA	
CITY-ST-ZIP	OMAHA, NE 68131	
TITLE	PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMAS S. SHELBY	
STREET ADDRESS	1000 KIEWIT PLAZA	
CITY-ST-ZIP	OMAHA, NE 68131	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TREASURER	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANNE E BEGLEY	
STREET ADDRESS	1000 KIEWIT PLAZA	
CITY-ST-ZIP	OMAHA, NE 68131	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Gregory D. Brokke

Secretary

04/24/01

402-342-2052

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)