

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 21, 2001 8:00 am
Secretary of State

08-21-2001 90031 023 ***550.00

0136591 AT

DOCUMENT # F00000004064

1. Entity Name
WALTER CONSTRUCTION (USA), INC.

Principal Place of Business

**4180 LIND SW
 RENTON VA 98055**

Mailing Address

**4180 LIND SW
 RENTON VA 98055**

233 19th Street N.E.

233 19th Street N.E.

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Calgary, AB, Canada

Calgary, AB

City & State

City & State

4. FEI Number

91-1343363

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

Zip

Country

Zip

Country

T2E 7Z8

T2E 7Z8

Canada

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

C T CORPORATION SYSTEM

1300 SOUTH PINE ISLAND ROAD

PLANTATION FL 33324

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 ☐ Delete
 NAME **C**
 STREET ADDRESS **EDEN, ROBERT W**
 CITY-ST-ZIP **821 RIDEAU RD, SW**
CALGARY, ALBERTA

TITLE ☐ Change ☒ Addition
 NAME **Director**
 STREET ADDRESS **Rudolf Muchle**
 CITY-ST-ZIP **Dywidag International**
Munich, Germany

TITLE ☒ Delete
 NAME **P**
 STREET ADDRESS **GOODALE, BRIEN**
 CITY-ST-ZIP **PH# 4, 100-10A ST, NW**
CALGARY

TITLE ☐ Change ☒ Addition
 NAME **Director**
 STREET ADDRESS **Dale Anderson**
 CITY-ST-ZIP **182 Timberline Dr.**
Kelowna, BC

TITLE ☒ Delete
 NAME **VST**
 STREET ADDRESS **BOUWMAN, JAAP**
 CITY-ST-ZIP **15 BAYVIEW DR, SW**
CALGARY, ALBERTA

TITLE ☐ Change ☒ Addition
 NAME **COO**
 STREET ADDRESS **Michael Frick**
 CITY-ST-ZIP **60 Mt. Alberta Green S.E.**
Calgary, Alberta

TITLE ☐ Delete
 NAME **V**
 STREET ADDRESS **TENNOCK, NORM**
 CITY-ST-ZIP **703, 100-10A STREET NW**
CALGARY, ALBERTA

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

TITLE ☐ Delete
 NAME **V**
 STREET ADDRESS **ROSS, FRANK**
 CITY-ST-ZIP **2307 RIDGE LANDING**
OAKVILLE, ONTARIO

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

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **KERN, PETER**
 CITY-ST-ZIP **WALTER BAU-AG**
GERMANY

TITLE ☐ Change ☐ 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

July 31, 2001 (403) 207-7377

Daytime Phone #

CR2E034 (5/01)