


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

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

03-01-2004 90026 038 \*\*\*158.75

**DOCUMENT # F93000000676**

1. Entity Name  
**URS GROUP, INC.**



Principal Place of Business  
**7101 WISCONSIN AVENUE  
 SUITE 700  
 BETHESDA, MD 20814 US**

Mailing Address  
**100 CALIFORNIA STREET  
 SUITE 500  
 SAN FRANCISCO, CA 94111-4529 US**

**54012963**

2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
**600 MONTGOMERY STREET  
 25th Floor**

City & State  
**SAN FRANCISCO CA**

Zip Country  
**94111 USA**



01142004 Chg-P CR2E034 (10/03)

4. FEI Number  
**94-3077384**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

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

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 \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRV WHITENIGHT, DONALD K 200 ORCHARD RIDGE DR #101 GAITHERSBURG, MD 20878 <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	VST GUNDARLAHALLI, RAMANJANEYA 8181 EAST TUFTS AVE DENVER, CO 80237 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT RAMANJANEYA, GUNDARLAHALLI <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SRV BUTTS, JOHN E 2401 4TH AVE #1000 SEATTLE, WA 98121 <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 VIRENDRA, SINGH 282 DELAWARE AVE BUFFALO, NY 14202 <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 WALKER, FREDERICK K 7650 W COURTNEY CAMPBELL CSWY 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	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

- See attached -

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** Date: 1-4-04 Daytime Phone #: 415-774-2700

attachment

URS GROUP, INC.  
Document Number F93000000676

54012963

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P/D <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSENSTEIN, IRWIN L.	NAME	
STREET ADDRESS	One Penn Plaza, Suite 610	STREET ADDRESS	
CITY-ST-ZIP	New York, NY 10119	CITY-ST-ZIP	
TITLE	EV/D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AINSWORTH, KENT P.	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/D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEDALINO, PETER	NAME	
STREET ADDRESS	Mack-Cali Centre II, One Mack Centre Drive	STREET ADDRESS	
CITY-ST-ZIP	Paramus, NJ 07652	CITY-ST-ZIP	
TITLE	EV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TANZER, MARTIN S.	NAME	
STREET ADDRESS	One Penn Plaza, Suite 610	STREET ADDRESS	
CITY-ST-ZIP	New York, NY 10119	CITY-ST-ZIP	
TITLE	EV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MILLER, JAMES R.	NAME	
STREET ADDRESS	St. George's House, 2nd fl., 5 St. George's Rd.	STREET ADDRESS	
CITY-ST-ZIP	London, UK SW19 4DR	CITY-ST-ZIP	
TITLE	SrV/AS <input type="checkbox"/> Delete	TITLE	SrV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ADAMS, GARY	NAME	ADAMS, GARY
STREET ADDRESS	7101 Wisconsin Avenue, Suite 700	STREET ADDRESS	7101 Wisconsin Avenue, Suite 700
CITY-ST-ZIP	Bethesda, MD 20814	CITY-ST-ZIP	Bethesda, MD 20814
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AMAN, STEVEN	NAME	
STREET ADDRESS	614 East Edna Place	STREET ADDRESS	
CITY-ST-ZIP	Covina, CA 91723	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BALFOUR, W. DAVID	NAME	
STREET ADDRESS	9400 Amberglen Blvd.	STREET ADDRESS	
CITY-ST-ZIP	Austin, TX 78729	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, 24th floor	STREET ADDRESS	600 Montgomery Street, 25th Floor
CITY-ST-ZIP	San Francisco, CA 94105	CITY-ST-ZIP	San Francisco, CA 94111

*Attachment*

URS GROUP, INC.

Document Number **F93000000676**

524012963

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	BLOOM, MARVIN	NAME	
STREET ADDRESS	One Penn Plaza, Suite 610	STREET ADDRESS	
CITY-ST-ZIP	New York, NY 10119	CITY-ST-ZIP	
TITLE	SrV <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORBETT, WILLIAM E.	NAME	
STREET ADDRESS	9400 Amberglen Blvd.	STREET ADDRESS	
CITY-ST-ZIP	Austin, TX 78729	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CZARNECKI, R. MARTIN	NAME	
STREET ADDRESS	221 Main Street, Suite 600	STREET ADDRESS	
CITY-ST-ZIP	San Francisco, CA 94105	CITY-ST-ZIP	
TITLE	SrV <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	GALLEN, ROBERT M.	NAME	
STREET ADDRESS	7650 West Courtney Campbell Causeway	STREET ADDRESS	
CITY-ST-ZIP	Tampa, FL 33607	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERAN, FRANCIS J.	NAME	
STREET ADDRESS	Mack-Cali Centre II, One Mack Centre Drive	STREET ADDRESS	
CITY-ST-ZIP	Paramus, NJ 07652	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEWIRTZMAN, JAY	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	GORTON, JOHN C.	NAME	
STREET ADDRESS	282 Delaware Avenue	STREET ADDRESS	
CITY-ST-ZIP	Buffalo, NY 14202	CITY-ST-ZIP	
TITLE	SrV <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOLEMAN, JB	NAME	
STREET ADDRESS	7101 Wisconsin Avenue, Suite 700	STREET ADDRESS	
CITY-ST-ZIP	Bethesda, MD 20814	CITY-ST-ZIP	

Attachment

54012969

URS GROUP, INC.  
Document Number F93000000676

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JANDEGIAN, GARY V.	NAME	JANDEGIAN, GARY V.
STREET ADDRESS	2520 Venture Oaks Way, Suite 250	STREET ADDRESS	600 Montgomery Street, 25th Floor
CITY-ST-ZIP	Sacramento, CA 95833	CITY-ST-ZIP	San Francisco, CA 94111
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	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	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PROVENZA, VINCENT	NAME	
STREET ADDRESS	3500 N. Causeway Tower, Suite 900	STREET ADDRESS	
CITY-ST-ZIP	Metairie, LA 70002	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICHARDS, MICHAEL C.	NAME	
STREET ADDRESS	500 12th Street, Suite 200	STREET ADDRESS	1333 BROADWAY, SUITE 800
CITY-ST-ZIP	Oakland, CA 94608	CITY-ST-ZIP	OAKLAND, CA 94612
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RODENFELS, CHARLES A.	NAME	
STREET ADDRESS	277 West Nationwide Blvd.	STREET ADDRESS	
CITY-ST-ZIP	Columbus, OH 43215	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, WAYNE D.	NAME	
STREET ADDRESS	10975 El Monte, Suite 100	STREET ADDRESS	
CITY-ST-ZIP	Overland Park, KS 66211	CITY-ST-ZIP	
TITLE	SrV <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEVENSON, WILLIAM A.	NAME	
STREET ADDRESS	3950 Sparks Drive SE	STREET ADDRESS	
CITY-ST-ZIP	Grand Rapids, MI 49546	CITY-ST-ZIP	

Attachment

URS GROUP, INC.  
Document Number **F9300000676**

54012963

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	TROJAN, EDWARD J.	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	TUCCIARONE, LOUIS A.	NAME	
STREET ADDRESS	1515 Broadway, 35th floor	STREET ADDRESS	
CITY-ST-ZIP	New York, NY 100136	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	WAITKUS, ROBERT A.	NAME	
STREET ADDRESS	1400 Union Meeting Road, Suite 202	STREET ADDRESS	
CITY-ST-ZIP	Blue Bell, PA 19422	CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARMSTRONG, RITA	NAME	
STREET ADDRESS	50 Fremont, 24th floor	STREET ADDRESS	
CITY-ST-ZIP	San Francisco, CA 94105	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DZIERLENGA, P. STANLEY	NAME	
STREET ADDRESS	1600 Perimeter Pard Drive	STREET ADDRESS	
CITY-ST-ZIP	Morrisville, NC 27560	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 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
TITLE	V/AT <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

Attachment

URS GROUP, INC.  
Document Number F93000000676

524012463

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	PLUM, DAVID	NAME	
STREET ADDRESS	277 Bendix Road, Suite 500	STREET ADDRESS	
CITY-ST-ZIP	Virginia Beach, VA 23452	CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZIMMERMAN, JOSEPH	NAME	
STREET ADDRESS	2455 Horsepen Road, Suite 250	STREET ADDRESS	
CITY-ST-ZIP	Herndon, VA 20171	CITY-ST-ZIP	
TITLE	AS <input type="checkbox"/> Delete	TITLE	S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRUMMERSTEDT, CAROL	NAME	BRUMMERSTEDT, CAROL
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	<input type="checkbox"/> Delete	TITLE	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	JONES, KRISTIN L.
STREET ADDRESS		STREET ADDRESS	600 Montgomery Street, 25th Floor
CITY-ST-ZIP		CITY-ST-ZIP	San Francisco, CA 94111
TITLE	<input type="checkbox"/> Delete	TITLE	V <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		NAME	De VIVERO, RICHARD
STREET ADDRESS		STREET ADDRESS	315 East Robinson Street, Suite 245
CITY-ST-ZIP		CITY-ST-ZIP	Orlando, FL 32801