FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90136 002 ***150.00

DOCUMENT # F93000004050

1. Corporation Name
MONTGOMERY WATSON CONSTRUCTORS, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
300 WALNUT STREET	1300 WALNUT STREET
SUITE 20	SUITE 20
BOULDER CA 80302	BOULDER CA 80302
US	US

3. Date Incorporated or Qualifed: 09/07/1993

4. FEI Number: 84-1242056 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
370 INTERLOCKEN BLVD.	26 370 INTERLOCKEN BLVD.
Suite, Apt. #, etc.: STE 300	27 Suite, Apt. #, etc.: STE 300
City & State: BROOMFIELD, CO	28 City & State: BROOMFIELD, CO
Zip: 80021 — 25 Country: USA	29 Zip: 80021 — 30 Country: USA

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ DATE ______
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	☐ DELETE	1.1 TITLE	☒ Change ☐ Addition
NAME	HALL, PHILIP		1.2 NAME	
STREET ADDRESS	1300 WALNUT STREET, STE. 210		1.3 STREET ADDRESS	370 INTERLOCKEN BLVD, STE 300
CITY-ST-ZIP	BOULDER CO 80302		1.4 CITY-ST-ZIP	BROOMFIELD, CO 80021
TITLE	S	☐ DELETE	2.1 TITLE	☒ Change ☐ Addition
NAME	TAGGART, DAVID A		2.2 NAME	
STREET ADDRESS	1300 WALNUT STREET, STE. 210		2.3 STREET ADDRESS	250 No. MADISON AVE
CITY-ST-ZIP	BOULDER CO 80302		2.4 CITY-ST-ZIP	PASADENA, CA 91109
TITLE	T	☐ DELETE	3.1 TITLE	☒ Change ☐ Addition
NAME	GERRY BRAUN		3.2 NAME	MIKE FELLOWS
STREET ADDRESS	1300 WALNUT ST., TE 20		3.3 STREET ADDRESS	
CITY-ST-ZIP	BOULDER CO		3.4 CITY-ST-ZIP	BROOMFIELD CO 80021
TITLE	D	☒ DELETE	4.1 TITLE	ROBT. B. UNLER ☐ Change ☒ Addition
NAME	TOLANEY, MURIL		4.2 NAME	
STREET ADDRESS	1300 WALNUT STREET, STE. 210		4.3 STREET ADDRESS	370 INTERLOCKEN BLVD, STE 300
CITY-ST-ZIP	BOULDER CO 80302		4.4 CITY-ST-ZIP	BROOMFIELD, CO 80021
TITLE	D	☐ DELETE	5.1 TITLE	☒ Change ☐ Addition
NAME	RAY, JAMES W		5.2 NAME	
STREET ADDRESS	1300 WALNUT STREET, STE. 210		5.3 STREET ADDRESS	370 INTERLOCKEN BLVD, STE 300
CITY-ST-ZIP	BOULDER CO 80302		5.4 CITY-ST-ZIP	BROOMFIELD, CO 80021
TITLE	D	☒ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	TOLANEY, MURLI		6.2 NAME	
STREET ADDRESS	1300 WALNUT STREET, STE. 210		6.3 STREET ADDRESS	
CITY-ST-ZIP	BOULDER CO 80302		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 1/25/99 303/439-2801
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)