## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# F95000004014

Entity Name: AECOM TECHNICAL SERVICES, INC.

FILED Oct 23, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
300 OCEANGATE SUITE 700 LONG BEACH, CA 90802				515 SOUTH FLOWER STREET LOS ANGELES, CA 90071				
Current Mailing Address:				New Mailing Address:				
675 N. WASHINGTON STREET SUITE 300 ALEXANDRIA, VA 22314				4840 COX ROAD GLEN ALLEN, VA 23060				
FEI Number:	95-2661922	FEI Number Applied For ( )	FEI Num	nber Not Applic	cable ( )	Certificate of S	Status Desired ( )	
Name and Address of Current Registered Agent: Na					Name and Address of New Registered Agent:			
1200 SOUT PLANTATIO	DRATION SYS H PINE ISLAN DN, FL 33324	D ROAD US		<b>6</b> - 1		d - <b>6</b> 5		
in the State		ubmits this statement for the pur	rpose o	r changing its	s registered	a oπice or registe	ered agent, or both,	
SIGNATUR	E:							
	Electronic	Signature of Registered Agent	t			Date		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	DP () E KRUSI, ALAN P 300 OCEANGATE LONG BEACH, C	•		Title: Name: Address: City-St-Zip:		() Change () Add	ition	
Title: Name: Address: City-St-Zip:	CHEN, ERIC	Oelete STREET, 37TH FLOOR CA 90071		Title: Name: Address: City-St-Zip:		() Change () Add	lition	
Title: Name: Address: City-St-Zip:	SHIMODA, WES	Oelete STREET, 37TH FLOOR CA 90071		Title: Name: Address: City-St-Zip:		() Change () Add	lition	
Title: Name: Address: City-St-Zip:	S () E GARRETT, WILL 300 OCEANGATE LONG BEACH, C	IAM E E, SUITE 700		Title: Name: Address: City-St-Zip:		() Change () Add	lition	
Title: Name: Address: City-St-Zip:	V ()E GORDEN, DAVID 30 S. KELLER RO ORLANDO, FL 3	OAD, SUITE 500		Title: Name: Address: City-St-Zip:		() Change () Add	lition	
Title: Name: Address: City-St-Zip:	HEIDRICH, RICH	NRISE BLVD., SUITE 200		Title: Name: Address: City-St-Zip:		(X) Change ( ) Add OSE E LAS ENTRANCE BLES, FL 33134	lition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM E GARRETT V 10/23/2009