

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90381 010 ***150.00

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1. Entity Name
CH2M HILL INTERNATIONAL SERVICES, INC.



Principal Place of Business
**9191 SOUTH JAMAICA STREET
ENGLEWOOD, CO 80112**

Mailing Address
**P.O. BOX 22508
DENVER, CO 80222**

90120791



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

93-0750969

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

**NRAI SERVICES, INC.
526 EAST PARK AVE.
TALLAHASSEE, FL 32301**

Name

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

City

FL

Zip Code

B. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent's signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

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 ☐ Delete
NAME **D**
STREET ADDRESS **PETERSON, RALPH R**
CITY-ST-2P **82 FALCON HILLS DRIVE
HIGHLANDS RANCH, CO 80126**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-2P

TITLE ☐ Delete
NAME **AS**
STREET ADDRESS **MCADAMS, ELIZABETH A**
CITY-ST-2P **8693 BLUEBUNCH COURT
PARKER, CO 80134**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-2P

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **NELSON, L L**
CITY-ST-2P **3213 COUNTRY CLUB PARKWAY
CASTLE ROCK, CO 80104**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-2P

TITLE ☐ Delete
NAME **VP**
STREET ADDRESS **SANTEE, M. CATHERINE**
CITY-ST-2P **9218 RITENOUR COURT
LONETREE, CO 80124**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-2P

TITLE ☐ Delete
NAME **PD**
STREET ADDRESS **ROBINSON, KENT E**
CITY-ST-2P **7001 S CHAPORAL CIRCLE EAST
AURORA, CO 80016**

TITLE ☒ Change ☐ Addition
NAME **DIRECTOR**
STREET ADDRESS **Robinson, Kent E.**
CITY-ST-2P **12652 Roosevelt Ln., #B-2
Englewood, CO 80112**

TITLE ☐ Delete
NAME **T**
STREET ADDRESS **VINSON, STANLEY W**
CITY-ST-2P **21344 E BRIARWOOD DRIVE
AURORA, CO 80016**

TITLE ☐ Change ☒ Addition
NAME **President**
STREET ADDRESS **Robert B. Sheh**
CITY-ST-2P **1400 Paseo del Mar
Palos Verdes Estates, CA 90274**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elizabeth McAdams

Date

Daytime Phone #

4/28/03 303 7710900

CR2E034 (10/02)