FILE	NOW: FILING FEE	AFTER MAY 1 IS	S \$ 225	5.0	0				
CORPO ANNUAI	OFIT DRATION REPORT	Sandra I Secreta	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS						
DOCUM	ENT # P0149	9 (3)							
1. Corporation Na	ONSTRUCTORS, INC.								
Principal Place of Business Mailing Address						- I (ED)1641: II) ABIEL 11611 BIELD IBIE 1811 AIBIE AIBIE AIBIE AIBIE AIBIE AIBIE			
1670 BROADW	AY. STE. 3200	251 S. LAKE AVE	251 S. LAKE AVE						
STE - 900 Denver CO 80202 US			PASADENA CA 91101		3. Date incorporated or Qualified 04/04/1984		of Last Rep 05/01/199		
2. Principal Place	e of Business	2a. Mailing Address				4. FEI Number		<u> </u>	pplied For lot Applicable
21	,	26				76-0083883		_ 	Additional
Suite, Apt. #,	etc.	Suite Apt. #, etc.				5. Certificate of Status Desired		* - · ·	tequired
22		City & State				6. Election Campaign Financing		\$5.00	May Be
City & State		28				Trust Fund Contribution			to Fees
Zip	Country	Zφ	Cou	ntry		8. This corporation has liability for	intangible ta □ No	ax under s	199.032,
24	25	29	30			Florida Statutes Yes 10. Name and Address of New F		Agent	
	9. Name and Address of Currer	nt Registered Agent	'	81	Name	io. Name and realists			
						ress (P.O. Box Number is Not Accepta	nle)		
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD				82	Street Auc	iress (F.O Box Normon is 1447 lose).			
PLANTATION FL 33324				83					
POMIA	HOIT I C GOODT			84	City			85 Zip	o Code
					•	- A day the co	FL		enistered offic
11. Pursuant to or registere familiar with	the provisions of Sections 607.050 d agent, or both, in the State of Flor , and accent the obligations of Sec	2 and 607,1508, Florida Statu ida: Such change was authori tion 607,0505, Florida Statute	ites, the abo ized by the o es	ove r corp	iamed corpo pration's bo	pration submits this statement for the poard of directors. Thereby accept the app	pointment a	s registered	agent. I am
SIGNATURE _	Typatine, typast or practed resident register so age	danatrin day earle			t signaturi, raqni	collabor compand,	DATE	ID DIDECTO	NDS IN 12
12.	OFFICERS AN	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OF	FICERS AN	Change	Addition
TITLE	DP	☐ DELETE	1. 1						_
NAME	CRAM, SCOTT	200	12 5		ADDRESS				
STREET ADORESS	1670 BROADWAY, STE. 32	200			ADDRESS II - ZIP				
CiTY - ST - ZiP	DENVER CO	[] DELETE		Talle	12.7IL			Change	Addition
TITLE	PROSSER, JR J W	L. Joers to		NAME					
NAME	251 S LAKE AVE				ADDRESS				
STREET ADDRESS	PASADENA CA		•		ST ZIE				
CITY - ST - ZIP	I NONDEIN ON			2000				☐ Change	Addition

CR2E034 (12/95) Add tion Addition DELETE 3.1 1194.6 TITLE 3.2 NAME CORNELL, ROD 1530 WILSON BLVD, STE 600 **3.3 STREET ADDRESS** STREET ADDRESS 3.4 CI*Y - ST - ZIP ARLINGTON VA CITY - ST - ZIP Change ☐ Addition DELETE 4 1 TifeE TITLE 4.2 NAME DEAN, WARREN 4848 LOOP CENTRAL DRIVE 4.3 STREET AUDRESS STREET ADDRESS **HOUSTON TX** 4.4 CITY - ST - ZIP Addition CITY - ST - ZIF Change DELETE 5 I TIFLE THILE 5.2 NAMÉ TARNOW, PATRICIA NAME 5.3 STREET ADDRESS 1670 BROADWAY, STE 3200 STREET ADDRESS **DENVER CO** 5 4 CHY - ST - ZIP ☐ Change CHTY - ST-ZIP Add tion DELETE 6 1 THEF TITLE 6.2 NAME MARKLEYIII, WILLIAM C NAME € 3 STREET ADDRESS 251 S. LAKE AVE STREET ADDRESS 6.4 CITY - ST - Z.P.

14. If do hereby certify that the information supplied with this filing is voluntarly furnished and does not qualify for the exemption stated in Section 119.07(3)(6). 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 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 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 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 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 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 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 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 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 under the certific that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if under the certific that the information indicated on

4/14/96

John W. Prosser, Jr. (818) 449-2171

Date: Capital Project