

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2002 8:00 am
Secretary of State

05-27-2002 90278 019 ***150.00

DOCUMENT # P13793

1. Entity Name
FOSTER WHEELER CONSTRUCTORS, INC.

Principal Place of Business
PERRYVILLE CORPORATE PARK
CLINTON NJ 08809-4000

Mailing Address
PERRYVILLE CORPORATE PARK
%TAX DEPT
CLINTON NJ 08809-4000
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

22-2749540

Applied For

Not Applicable

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

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

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Delete
NAME **BLYTHE, JOHN C**
STREET ADDRESS **PERRYVILLE CORPORATE PARK**
CITY-ST-ZIP **CLINTON NJ**

TITLE **P/CEO/D** ☐ Change ☒ Addition
NAME **Henry B. Highland**
STREET ADDRESS **Perryville Corporate Park**
CITY-ST-ZIP **Clinton, NJ 08809**

TITLE **PD** ☐ Delete
NAME **JONES, LEONARD F**
STREET ADDRESS **PERRYVILLE CORPORATE PARK**
CITY-ST-ZIP **CLINTON NJ 08809**

TITLE **SVP** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **KOECKERT, ROBERT A**
STREET ADDRESS **PERRYVILLE CORPORATE PK**
CITY-ST-ZIP **CLINTON NJ**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☐ Delete
NAME **MANNION, PAUL E**
STREET ADDRESS **PERRYVILLE CORPORATE PK**
CITY-ST-ZIP **CLINTON NJ 08809**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **FRIES-GARDNER, LISA**
STREET ADDRESS **PERRYVILLE CORPORATE PK**
CITY-ST-ZIP **CLINTON NJ**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **CTD** ☐ Delete
NAME **JINDAL, RAKESH**
STREET ADDRESS **PERRYVILLE CORPORATE PK**
CITY-ST-ZIP **CLINTON NJ 08809**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 11 or Block 12 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

4/30/02
 Date

Daytime Phone #

CR2E034 (9/01)