

P13793

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

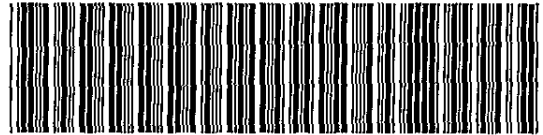
(Document Number)

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02 DEC 18 PM 2:17

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED

02 DEC 18 PM 3:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

R.A. change

T BROWN DEC 19 2002

**CT CORPORATION SYSTEM**

CORPORATION(S) NAME

Foster Wheeler Constructors, Inc.

|                                              |                                                 |                                                  |
|----------------------------------------------|-------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Profit              | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger                  |
| <input type="checkbox"/> Nonprofit           |                                                 |                                                  |
| <input type="checkbox"/> Foreign             | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                    |
|                                              | <input type="checkbox"/> Reinstatement          |                                                  |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other                   |
| <input type="checkbox"/> LLC                 | <input type="checkbox"/> Name Registration      | <input checked="" type="checkbox"/> Change of RA |
|                                              | <input type="checkbox"/> Fictitious Name        | <input type="checkbox"/> UCC                     |
| <input type="checkbox"/> Certified Copy      | <input type="checkbox"/> Photocopies            | <input type="checkbox"/> CUS                     |
| <input type="checkbox"/> Call When Ready     | <input type="checkbox"/> Call If Problem        | <input type="checkbox"/> After 4:30              |
| <input checked="" type="checkbox"/> Walk In  | <input type="checkbox"/> Will Wait              | <input checked="" type="checkbox"/> Pick Up      |
| <input type="checkbox"/> Mail Out            |                                                 |                                                  |

|                     |          |                  |
|---------------------|----------|------------------|
| Name                | 12/18/02 | Order#: 5744172  |
| Availability _____  |          |                  |
| Document            | AAM      |                  |
| Examiner _____      |          | Ref#: _____      |
| Updater _____       |          |                  |
| Verifier _____      |          |                  |
| W.P. Verifier _____ |          | Amount: \$ _____ |

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED  
AGENT OR BOTH FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Delaware submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation : FOSTER WHEELER CONSTRUCTORS, INC.
2. The mailing address of the corporation : PERRYVILLE CORPORATE PARK  
CLINTON/NJ/088094000
3. Date of incorporation/qualification: 3/26/87 Document number: 713793
4. The name and address of the current registered agent and office:

The Prentice-Hall Corporation System, Inc.

1201 Hays St., Suite 105, Tallahassee, FL 32301

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):  
(P. O. Box Not Acceptable)

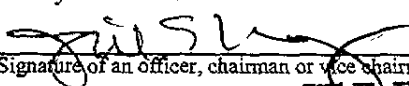
C T Corporation System

c/o C T Corporation System, 1200 South Pine Island Road,

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.

  
(Signature of an officer, chairman or vice chairman of the board)

\_\_\_\_\_  
(Date)

**Jill E. Kranz**  
**Vice President**

\_\_\_\_\_  
(Printed or typed name and title)

*Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.*

C T Corporation System

By: 

\_\_\_\_\_  
(Signature of Registered Agent)

12/11/02  
(Date)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(Capacity)

**\*\*\* FILING FEE: \$35.00 \*\*\***

CR2E045(9/00)

DIVISION OF CORPORATIONS

P.O. Box 6327

TALLAHASSEE, FL 32314

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