


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 29, 2008 8:00 am
Secretary of State

05-29-2008 90197 004 ***150.00

DOCUMENT # P24174

1. Entity Name
FOSTER WHEELER ENERGY SERVICES, INC.



Principal Place of Business Mailing Address

**9645 SCRANTON RD
SAN DIEGO CA 92121** **C/O TAX DEPT
PERRYVILLE CORPORATE PARK
CLINTON NJ 08809
US**



2. Principal Place of Business - No P.O. Box #
Perryville Corporate Park

3. Mailing Address

Suite, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State
Clinton NJ

City & State

Zip Country Zip Country

08809-4000 USA 08809-4000

4. FEI Number Applied For

76-0271671 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____

Signature, typed or printed name, of registered agent and title, if applicable. (NOTE: Registered Agent signature required when rechartering.)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DESMANIS, THIERRY PERRYVILLE CORPORATE PARK BRIDGEWATER NJ 08807 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP JINDAL, RAKESH K PERRYVILLE CORPORATE PARK CLINTON NJ 08809 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NEDELKA, GARY T PERRYVILLE CORPORATE PARK CLINTON NJ 08809 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SCERBO, ANTHONY PERRYVILLE CORPORATE PLACE CLINTON NJ 08809 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DOYLE, JOHN A JR PERRYVILLE CORPORATE PARK CLINTON NJ 08809 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DEAN, EDWARD C PERRYVILLE CORPORATE PARK CLINTON NJ 08809 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Scerbo, Anthony Perryville Corporate Park Clinton NJ 08809 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/S Ganz, Peter J. Perryville Corporate Park Clinton NJ 08809 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Hagan, Kevin C. Perryville Corporate Park Clinton NJ 08809 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V DiLauri, Steve Perryville Corporate Park Clinton NJ 08809 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT Thau, Ronald R. Perryville Corporate Park Clinton NJ 08809 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: *Edward C Dean*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: *5/11/08* Days to File: *908-730-4000*