

P26734

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

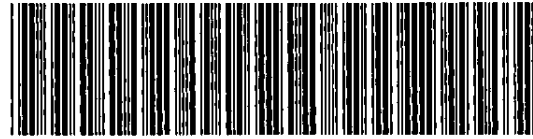
(Business Entity Name)

(Document Number)

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RA Address  
Change

09/17/12--01008--015 \*\*35.00

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2012 SEP 17 PM 4:37  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DR  
9/18/12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Gannett Fleming, Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P26734

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey D. Bryson  
Name of Contact Person

Gannett Fleming, Inc.  
Firm/Company

P.O. Box 67100  
Address

Harrisburg, PA 17106-7100  
City/State and Zip Code

CorpReg@gfnet.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey D. Bryson at ( 717 ) 763-7211  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**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, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Gannett Fleming, Inc.  
2. The principal office address: 207 Senate Avenue, Camp Hill, PA 17011  
3. The mailing address (if different): P.O. Box 67100, Harrisburg, PA 17106-7100

4. Date of incorporation/qualification: 10/13/1989 Document number: P26734

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

John Dougherty

10751 Deerwood Park Blvd, Suite 140

Jacksonville, FL 32256

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

(Agent remains the same; street address change only.)

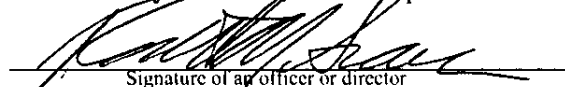
10161 Centurion Parkway North, Suite 300

P.O. Box NOT acceptable

Jacksonville, FL 32256

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

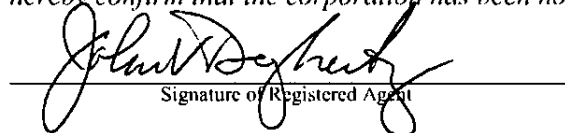
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Robert M. Scaer

Printed or typed name and title

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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

  
Signature of Registered Agent

8/29/12  
Date

If signing on behalf of an entity:

John V. Dougherty  
Typed or Printed Name

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