

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

843556

1. Entity Name

ELLERBE BECKET ARCHITECTS AND ENGINEERS, INC.

Principal Place of Business

800 LaSalle Avenue
Minneapolis, MN 55402

Mailing Address

800 LaSalle Avenue
Minneapolis, MN 55402

FILED

00 APR 24 PM 2:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

4. FEI Number

41-1347451

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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.

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, 2000 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	CEO/Secretary	<input type="checkbox"/> Delete
NAME	Degenhardt, Robert A.	
STREET ADDRESS	800 LaSalle Avenue	
CITY-ST-ZIP	Minneapolis, MN	
TITLE	President	<input type="checkbox"/> Delete
NAME	Lincicome, Rick A.	
STREET ADDRESS	800 LaSalle Avenue	
CITY-ST-ZIP	Minneapolis, MN	
TITLE	CFO/Vice President	<input type="checkbox"/> Delete
NAME	Miller, Rick	
STREET ADDRESS	800 LaSalle Avenue	
CITY-ST-ZIP	Minneapolis, MN	
TITLE	Vice President/Director	<input type="checkbox"/> Delete
NAME	Wood, Randy W.	
STREET ADDRESS	800 LaSalle Avenue	
CITY-ST-ZIP	Minneapolis, MN	
TITLE	Vice President/Director	<input type="checkbox"/> Delete
NAME	DeBruin, Robert E.	
STREET ADDRESS	800 LaSalle Avenue	
CITY-ST-ZIP	Minneapolis, MN	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	600003236106-9
STREET ADDRESS	-05/03/00--01016--003
CITY-ST-ZIP	****150.00 ****150.00
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TS
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

Robert A. Degenhardt

4/5/00

(612) 376-2000

Date

Daytime Phone #

CR2E034 (9/99)