2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT#814404

Entity Name: AECOM USA, INC.

FILED Mar 19, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
515 SOUTH FLOWER ST. 4TH FLOOR LOS ANGELES, CA 90071					ipai i 1 406 0 1	Busiliess.	
Current Mailing Address:			ı	New Mailing Address:			
515 SOUTH FLOWER ST. 4TH FLOOR LOS ANGELES, CA 90071							
FEI Number: 13-5511947 FEI Number Applied For () FEI Num			FEI Numl	nber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
				CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US			
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: MADONNA CUDDIHY				03/19/2009			
	Electroni	Signature of Registered Agent	t			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P () I LEVY, IRA A 605 THIRD AVEN NEW YORK, NY		1	Title: Name: Address: City-St-Zip:	()	Change () Addition	on
Title: Name: Address: City-St-Zip:	SVP () I MCKINNON, LUK 605 THIRD AVEN NEW YORK, NY	IUE	1	Title: Name: Address: City-St-Zip:	HARTWIG, GLE	AY DRIVE, SUITE 1	
Title: Name: Address: City-St-Zip:	EVP () I PULICARE, JOS 605 THIRD AVEN NEW YORK, NY	IUE	1	Title: Name: Address: City-St-Zip:	()	Change () Addition	on
Title: Name: Address: City-St-Zip:	SGC () I GREENSPAN, EI 605 THIRD AVEN NEW YORK, NY	IUE _	1	Title: Name: Address: City-St-Zip:	SVP (X) GREENSPAN, E 605 THIRD AVE NEW YORK, N	NUE	on
Title: Name: Address: City-St-Zip:	AS () I SHIMODA, WES 515 SOUTH FLO LOS ANGLES, C	WER STREET	1	Title: Name: Address: City-St-Zip:	()	Change () Addition	on
Title: Name: Address: City-St-Zip:	SVP () I ANIDO, GUILLEF 800 DOUGLAS F CORAL GABLES	RD., SUITE 770	1	Title: Name: Address: City-St-Zip:	WOLSFELD, R	R DRIVE, SUITE 60	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELISE R. GREENSPAN SVP 03/19/2009