

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000001913

Entity Name: APTIM COASTAL PLANNING & ENGINEERING, LLC**Current Principal Place of Business:**2481 NW BOCA RATON BLVD
BOCA RATON, FL 33431**Current Mailing Address:**4171 ESSEN LANE
ATTN: MELISSA HARRELL
BATON ROUGE, LA 70809 US**FEI Number:** 59-2388327**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T 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:**_____
Electronic Signature of Registered Agent_____
Date**Authorized Person(s) Detail :**

Title AMBR
Name APTIM GOVERNMENT SOLUTIONS, LLC
Address 2481 NW BOCA RATON BLVD
City-State-Zip: BOCA RATON FL 33431

Title SEC
Name BASS, WADE
Address 4171 ESSEN LANE
City-State-Zip: BATON ROUGE LA 70809

Title TRES
Name GRIFFIN, KAY
Address 4171 ESSEN LANE
City-State-Zip: BATON ROUGE LA 70809

Title VP
Name MANN, DOUGLAS
Address 2481 NW BOCA RATON BLVD
City-State-Zip: BOCA RATON FL 33431

Title VP
Name ANDREWS, JEFF
Address 2481 NW BOCA RATON BLVD
City-State-Zip: BOCA RATON FL 33431

Title VP
Name LOWE, BRADLEY
Address 4171 ESSEN LANE
City-State-Zip: BATON ROUGE LA 70809

Title PRES
Name STOCKBERGER, TODD
Address 4171 ESSEN LANE
City-State-Zip: BATON ROUGE LA 70809

I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WADE BASS**SECRETARY****04/23/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date