

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F13000000940

**FILED**  
**Mar 24, 2023**  
**Secretary of State**  
**0512223422CC**

**Entity Name:** PARSONS CONSTRUCTION GROUP INC.

**Current Principal Place of Business:**

100 WEST WALNUT ST  
PASADENA, CA 91124

**Current Mailing Address:**

16055 SPACE CENTER BLVD STE 725  
HOUSTON, TX 77062 US

**FEI Number:** 32-0153912

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND RD  
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

**Officer/Director Detail :**

Title SECRETARY, DIRECTOR, SR VP  
Name KOLLOWAY, MICHAEL R.  
Address 1422 S. TRYON ST. STE. 800  
City-State-Zip: CHARLOTTE NC 28203

Title ASST. SECRETARY  
Name WILLIAMS, CARLTON E  
Address 16055 SPACE CENTER BLVD STE 725  
City-State-Zip: HOUSTON TX 77062

Title TREASURER  
Name AHMED, HAROON  
Address 100 W WALNUT ST  
City-State-Zip: PASADENA CA 91124

Title VP  
Name BETANCOURT, JOSE  
Address 100 W WALNUT ST  
City-State-Zip: PASADENA CA 91124

Title VP, ASST. SECRETARY  
Name WALKER-LANZ, PAUL I  
Address 100 WEST WALNUT STREET  
City-State-Zip: PASADENA CA 91124

Title PRESIDENT  
Name TORRELLAS, PETER  
Address 5875 TRINITY PKWY STE 140  
City-State-Zip: CENTREVILLE VA 20120

Title ASST. SECRETARY  
Name SAAD, SAMUEL J  
Address 7600 CORPORATE CENTER DR. #104  
City-State-Zip: MIAMI FL 33126

Title SR VP, ASST. SEC  
Name ZEINI, ABDULLAH M  
Address 201 E PINE ST STE 900  
City-State-Zip: ORLANDO FL 32801

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*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 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 all other like empowered.*

**SIGNATURE:** CARLTON E WILLIAMS

**ASST SECRETARY**

**03/24/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title VP  
Name WITTE, BRIAN K  
Address 12250 N. PECOS ST. #500  
City-State-Zip: WESTMINSTER CO 80234