

2013 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F92000000884

Entity Name: HNTB CORPORATION**Current Principal Place of Business:**715 KIRK DRIVE
KANSAS CITY, MO 64105**Current Mailing Address:**PO BOX 412197
KANSAS CITY, MO 64141 US**FEI Number:** 43-1623092**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH, LTD., INC.
155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 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	D
Name	HAMMOND, HARVEY K. JR.
Address	11414 WEST PARK PLACE, STE. 300
City-State-Zip:	MILWAUKEE WI 53224

Title	T
Name	CAMPBELL, TERRY M
Address	715 KIRK DRIVE
City-State-Zip:	KANSAS CITY MO 64105

Title	S
Name	DENSON, CRAIG W
Address	715 KIRK DRIVE
City-State-Zip:	KANSAS CITY MO 64105

Title	AS
Name	BESHONER, BENJAMIN C.
Address	715 KIRK DRIVE
City-State-Zip:	KANSAS CITY MO 64105

Title	DIRECTOR
Name	GAISER, BANE L
Address	715 KIRK DRIVE
City-State-Zip:	KANSAS CITY MO 64105

Title	DIRECTOR, PRESIDENT
Name	YAROSSI, PAUL A
Address	5 PENN PLAZA, 6TH FLOOR
City-State-Zip:	NEW YORK NY 10001

Title	ASST. SECRETARY
Name	STASKA, SCOTT H.
Address	715 KIRK DRIVE
City-State-Zip:	KANSAS CITY MO 64105

Title	ASST. SECRETARY
Name	JEFFERS, JOSEPH D.
Address	343 E. SIX FORKS ROAD STE. 200
City-State-Zip:	RALEIGH NC 27609

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: CRAIG W. DENSON**SECRETARY****12/10/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date