

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000000676

**Entity Name:** URS GROUP, INC.

**Current Principal Place of Business:**

2020 K STREET NW  
SUITE 300  
WASHINGTON DC, DC 20006

**Current Mailing Address:**

2020 K STREET NW  
SUITE 300  
WASHINGTON DC, DC 20006 US

**FEI Number:** 94-3077384

**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

**Officer/Director Detail :**

Title DIRECTOR  
Name KEENER, TIMOTHY H.  
Address 1600 PERIMETER PARK DRIVE  
City-State-Zip: MORRISVILLE NC 27560

Title DIRECTOR  
Name RUDD, WILLIAM TROY  
Address 1999 AVENUE OF THE STARS  
SUITE 2600  
City-State-Zip: LOS ANGEES CA 90067

Title DIRECTOR  
Name ENGLE, GARY A.  
Address 1501 - 4TH AVENUE  
SUITE 1400  
City-State-Zip: SEATTLE WA 98101-1616

Title TREASURER  
Name DRISCOLL, KEENAN EDWARD  
Address 2020 K STREET NW  
SUITE 300  
City-State-Zip: WASHINGTON DC DC 20006

Title SECRETARY  
Name SZURGOT, CHARLES F.  
Address 2020 K STREET NW  
SUITE 300  
City-State-Zip: WASHINGTON DC 20006

Title PRESIDENT  
Name ENGLE, GARY A.  
Address 1501 - 4TH AVENUE  
SUITE 1400  
City-State-Zip: SEATTLE WA 98101-1616

*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:** CHARLES F. SZURGOT

**SECRETARY**

**04/25/2018**

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

\_\_\_\_\_  
Date