

2014 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 20006

FILED
Jan 02, 2014
Secretary of State
CC2036734342

Current Mailing Address:

600 MONTGOMERY STREET
25TH FLOOR
SAN FRANCISCO, CA 94111 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 SRV
Name WHITENIGHT, DONALD K
Address 2020 K STREET NW
SUITE 300
City-State-Zip: WASHINGTON DC 20006

Title V
Name WALKER, FREDERICK K
Address 7650 W COURTNEY CAMPBELL CSWY
City-State-Zip: TAMPA FL 33607

Title PD
Name JANDEGIAN, GARY
Address 600 MONTGOMERY ST., 25TH PL.
City-State-Zip: SAN FRANCISCO CA 94111

Title S
Name JONES, KRISTIN L
Address 600 MONTGOMERY ST., 25TH PL.
City-State-Zip: SAN FRANCISCO CA 94111

Title DIRECTOR
Name BOECHLER, PAUL M
Address 600 MONTGOMERY STREET
25TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94111

Title DIRECTOR
Name MASTERS, JOSEPH
Address 600 MONTGOMERY STREET
25TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94111

Title DIRECTOR, VP, CFO
Name HICKS, H. T.
Address 600 MONTGOMERY STREET
25TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94111

Title VP, TREASURER
Name RODGERS, JUDY L
Address 600 MONTGOMERY STREET
25TH FLOOR
City-State-Zip: SAN FRANCISCO CA 94111

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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: KRISTIN L. JONES

SECRETARY

01/02/2014

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP
Name KEENER, TIMOTHY
Address 1600 PERIMETER PARK DRIVE
SUITE 400
City-State-Zip: MORRISVILLE NC 27560

Title VP
Name LEVY, DANIEL J
Address 7650 CORPORATE CENTER DRIVE
SUITE 400
City-State-Zip: MIAMI FL 33126

Title VP
Name MCDANIEL, WILLIAM H JR.
Address 7650 W COURTNEY CAMPBELL CSWY
City-State-Zip: TAMPA FL 33607

Title SVP
Name DICKEY, CHARLES D JR.
Address 6135 PARK SOUTH DRIVE
SUITE 300
City-State-Zip: CHARLOTTE NC 28210

Title VP
Name MAYO, JAMES L
Address 7650 W COURTNEY CAMPBELL CSWY
City-State-Zip: TAMPA FL 33607

Title VP
Name WALKER, FREDERICK K
Address 7650 W COURTNEY CAMPBELL CSWY
City-State-Zip: TAMPA FL 33607