

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39966

Entity Name: LOUIS BERGER U.S., INC.**Current Principal Place of Business:**412 MOUNT KEMBLE AVENUE
MORRISTOWN, NJ 07960**Current Mailing Address:**P.O. BOX 1946
MORRISTOWN, NJ 07962-1946 US**FEI Number: 13-3622704****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
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 PRESIDENT
Name LEWIS, THOMAS G
Address 412 MOUNT KEMBLE AVENUE
City-State-Zip: MORRISTOWN NJ 07960

Title VP, DIRECTOR
Name LASSARAT, MARGARET K
Address 412 MOUNT KEMBLE AVENUE
City-State-Zip: MORRISTOWN NJ 07960

Title SECRETARY
Name D'AGOSTA, JEFF
Address 412 MOUNT KEMBLE AVENUE
City-State-Zip: MORRISTOWN NJ 07960

Title TREASURER, DIRECTOR
Name BRAY, MATTHEW
Address 412 MOUNT KEMBLE AVENUE
City-State-Zip: MORRISTOWN NJ 07960

Title DIRECTOR
Name BACH, JAMES G
Address 412 MOUNT KEMBLE AVENUE
City-State-Zip: MORRISTOWN NJ 07960

Title ASST. SECRETARY
Name SADOWSKI, MARK V
Address 412 MOUNT KEMBLE AVENUE
City-State-Zip: MORISTOWN NJ 07960

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: MARGARET K. LASSARAT**VICE PRESIDENT****04/26/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date