## 165770

700002474517--9

Annual Report-Filed on 1-14-79 THE FILING FEE FOR THE 1979 ANNUAL REPORT IS \$10.

CORPORATION
ANNUAL REPORT



DEPARTMENT OF STATE DIVISION DECORPORATIONS

CH2M HILL

JAN 2 1979

1979

14 11 12 AH 1

MAIL ROOM GNY

THIS REPORT MUST BE ACCOMPANIED BY A \$10, FEE HS DIVISI

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING EN	rries 👂	•
---	---------	---

. Name and Address of Corporation Principal	I Office:		2. Enter Change of Address of Corporation Principal
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Office, P.O. Box Number Alone is NOT Sufficient.
F165770 CHZM HILL SOUTHE		,, <sub>c</sub> –	Street Address
		14C •	P.O. Box No.
7201 N.W. 11TH F	LACE	32601	P.O. BOX NO.
GAINESVILLE FLA		25801	City
<u>L</u> .		<b>.</b>	City City
If above address is incorred in Item 2, Include Zip Code	et in any way,	enter the correct address	State Zip Code
Date Incorporated or Qualified		A. Federal Employer	5. Date of
To Do Business in Florida 7/13	2/1951	Identification Number 59-091	8189 Last Report 1978
Names and Street Addressos of Each Office	er and Directo		
		Street Address of Each	
Names of Officers and Directors	Title	Officer and Director (Do NOT Use Post Office Box Numb	City and State
.3.t. J.E.	P/0	7201 N.W. 11TH PLAC	
ISHER. M.	ν	1600 WESTERN BLVD.	CORVALLIS, OREGON
CORNELL. F.A.	V	1600 WESTERN BLVO.	CORVALLIS, CREGON
ASS.ELL, S S.	V	1600 WESTERN BLVD.	CORVALLIS, OREGON
RICE, A.H.	V/C	1600 WESTER'S BLVD.	CORVALLIS, OREGON
ISHER, M.	S	1600 MESTERN BLVD.	CORVALLIS, OPEGON
OHN J. SMITH, JR.	<u>v</u>	7201 N.W. lith Place	Gainesville, FL
· Registered Agent Information		1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	If you wish to change Registered Agent on the form, enter all new information below
Name			Name
ORTH, JOSEPH &			Street Address (Do NOT Use PO Box Number)
Street Address (Do NOT Use P.O. Box Numb	P3T)		Super Address (no 401 0244 0 Box Malayer)
7201 NW 11 PLACE			City, State and Zip Code
y, State and Zip Gode , TNFS V TLES - FE 32601		Only, Orang and Exp Goods	
GAINESVILLE. FL		2 3. 4 4 4	DO NOT WRITE IN THIS SPACE
I Certify That I Am An Officer of th	e Corporation 607 F.S. 1.1	tructions on reverse side of this f on, the Receiver or Trustee Empowere further Certify That I Understand My : As If Made Under Oath.	orm.
yped Name of Signing Officer		Title	Telephone Number
ohn J. Smith, Jr.		Vice-President	(904) 377-2442
ilgnature Charles Charles	)		Date //3/-7-9
- 1000 (12) 2000 - 1	/	FEE FOR THE 1979 ANNUAL	<u> </u>

1 60 1 60 E 190