

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 165770

Entity Name: CH2M HILL, INC.

FILED
Apr 20, 2007
Secretary of State

Current Principal Place of Business:

9191 SOUTH JAMAICA ST.
ENGLEWOOD, CO 80112 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 22508
ATTN TAX DEPT
DENVER, CO 802220508 US

New Mailing Address:

FEI Number: 59-0918189

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: PETERSON, RALPH R
Address: 9191 S. JAMAICA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: P () Delete
Name: DEHN, WILLIAM T
Address: 9191 S. JAMAICA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: VP () Delete
Name: LATHEN, ROBERT L
Address: 9191 S JAMAICA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: SVP () Delete
Name: BULLOCK, ROBERT
Address: 9191 S. JAMAICA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: SVP () Delete
Name: THOMPSON, CLIFF G
Address: 115 PERIMETER CENTRE A NE #700
City-St-Zip: ATLANTA, GA 303461278

Title: VPC () Delete
Name: SHEA, JOANN
Address: 9191 S. JAMAICA ST
City-St-Zip: ENGLEWOOD, CO 80112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT L. LATHEN

VP

04/20/2007

Electronic Signature of Signing Officer or Director

Date