

# 2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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| <b>DOCUMENT #437291</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                     |                                                                                             |                                                                                                                                 |
| 1. Entity Name<br><b>THE PBSJ CORPORATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                     |                                                                                                                                                                              |                                                                                                                                 |
| Principal Place of Business<br><b>2001 NW 107TH AVE<br/>MIAMI, FL 33172</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                     | Mailing Address<br><b>2001 NW 107TH AVE<br/>MIAMI, FL 33172</b>                                                                                                              |                                                                                                                                 |
| 2. Principal Place of Business<br><b>5300 W. CYPRESS ST<br/>Suite, Apt. #, etc.<br/>STE. 200<br/>City &amp; State<br/>TAMPA, FL<br/>Zip<br/>33607<br/>Country<br/>US</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                     | 3. Mailing Address<br><b>5300 W. CYPRESS ST<br/>Suite, Apt. #, etc.<br/>STE. 200<br/>City &amp; State<br/>TAMPA, FL<br/>Zip<br/>33607<br/>Country<br/>US</b>                 |                                                                                                                                 |
| 4. FEI Number<br><b>59-1494168</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                     | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                       |                                                                                                                                 |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                     | 03022006 Chg-P CR2E034 (11/05)                                                                                                                                               |                                                                                                                                 |
| 6. Name and Address of Current Registered Agent<br><b>SCHAFFER, BECKY S<br/>500 WEST CYPRESS STREET<br/>SUITE 200<br/>TAMPA, FL 33607</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                     | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br><b>5300 WEST CYPRESS ST, STE 200</b><br>City <b>FL</b> Zip Code |                                                                                                                                 |
| 8. 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. I am familiar with, and accept the obligations of registered agent.<br>SIGNATURE <u>Becky S. Schaffer</u> DATE <u>3/8/06</u><br><small>Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reappointing)</small>                                                                                                                                                                                           |                                                                                                     |                                                                                                                                                                              |                                                                                                                                 |
| Amended AR is \$61.25                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                     | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                 |                                                                                                                                 |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                     | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                        |                                                                                                                                 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DV<br>SHEARER, JOHN S<br>2001 NW 107TH AVE<br>MIAMI, FL 33172 <input type="checkbox"/> Delete       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                               | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>482 SOUTH KELLER ROAD<br>ORLANDO, FL 32810-6101 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | CCEO<br>ZUMWALT, JOHN B III<br>2001 NW 107TH AVE<br>MIAMI, FL 33172 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                               | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>5300 W. CYPRESS ST., STE 200<br>TAMPA, FL 33607            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DVP<br>KENNER, TODD<br>2001 NW 107TH AVE<br>MIAMI, FL 33172 <input type="checkbox"/> Delete         | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                               | <input type="checkbox"/> Change <input type="checkbox"/> Addition<br>2270 CORPORATE CIRCLE, STE 100<br>HENDERSON, NV 89074-7755 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | V<br>SCHAFFER, BECKY S<br>2001 NW 107TH AVE<br>MIAMI, FL 33172 <input type="checkbox"/> Delete      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                               | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>5300 W. CYPRESS ST., STE 200<br>TAMPA, FL 33607 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VAS<br>GRUBEL, RICHARD M<br>2001 NW 107TH AVE<br>MIAMI, FL 33172 <input type="checkbox"/> Delete    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                               | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | VSO<br>PAULSEN, ROBERT J<br>2001 NW 107TH AVE<br>MIAMI, FL <input type="checkbox"/> Delete          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                               | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition<br>482 SOUTH KELLER ROAD<br>ORLANDO, FL 32810-6101 |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                                     |                                                                                                                                                                              |                                                                                                                                 |
| SIGNATURE: <u>Donald J. Vrana</u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                     | DONALD J. VRANA, CFO 3/6/06 813-282-7275                                                                                                                                     |                                                                                                                                 |

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