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Apr 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 816002 (0)

1. Corporation Name
JACOBS CONSTRUCTORS, INC.

Principal Place of Business
251 S LAKE AVENUE
PASADENA CA 91101-3063

Mailing Address
251 S LAKE AVENUE
PASADENA CA 91101-3003
US



3. Date Incorporated or Qualified 02/19/1962	3a. Date of Last Report 04/26/1996
4. FEI Number 72-0403456	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	10. Name and Address of New Registered Agent
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VPD	1.1 TITLE	Vice President/Director
NAME	JONES, ROBERT T.	1.2 NAME	Jones, Robert T
STREET ADDRESS	1880 WAYCROSS ROAD	1.3 STREET ADDRESS	4949 Essen Lane
CITY-ST-ZIP	CINCINNATI OH	1.4 CITY-ST-ZIP	Baton Rouge, LA 70809
TITLE	PD	2.1 TITLE	
NAME	POELCK, WERNER J	2.2 NAME	
STREET ADDRESS	1880 WAYCROSS ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	CINCINNATI OH	2.4 CITY-ST-ZIP	
TITLE	T	3.1 TITLE	
NAME	PROSSER, J W JR	3.2 NAME	
STREET ADDRESS	251 S LAKE AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA CA	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	
NAME	MARKLEY, W C III	4.2 NAME	
STREET ADDRESS	251 S LAKE AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA CA	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	
NAME	KERLER, WILLIAM R.	5.2 NAME	
STREET ADDRESS	251 S LAKE AVENUE	5.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA CA	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	
NAME	WATSON, NOEL G.	6.2 NAME	
STREET ADDRESS	251 S LAKE AVENUE	6.3 STREET ADDRESS	
CITY-ST-ZIP	PASADENA GA	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR John W. Prosser, Jr. 4/21/97 (818) 449-2171

CR2E034 (9/96)