

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90077 050 ***150.00

DOCUMENT # 816002

1. Entity Name
JACOBS CONSTRUCTORS, INC.



Principal Place of Business
**1111 S ARROYO PARKWAY
PASADENA, CA 91105 US**

Mailing Address
**P.O. BOX 7084
PASADENA, CA 91109-7084 US**

DO NOT WRITE IN THIS SPACE



04142004 No Chg-P CR2E034 (10/03)

4. FEI Number
72-0403456

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324**

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HAMMOND, THOMAS R
1111 S ARROYO PARKWAY
PASADENA, CA 91105**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
DEW, FRED W
TWO ASH STREET, SUITE 3000
CONSHOHOCKEN, PA 19428**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
PROSSER, J W JR
1111 S ARROYO PARKWAY
PASADENA, CA 91105**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
MARKLEY, W C III
1111 S ARROYO PARKWAY
PASADENA, CA 91105**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
LANDRY, GREG J
5995 ROGERDALE RD
HOUSTON, TX 77072**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
WATSON, NOEL G.
1111 S ARROYO PARKWAY
PASADENA, CA 91105**

**DO NOT WRITE
IN THIS SPACE**

12. I 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 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:

John W. Prosser, Jr.

John W. Prosser, Jr.

04/19/2004

(626) 578-3500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Treasurer**

Date

Daytime Phone #