2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT#821699

Entity Name: MWH AMERICAS INC.

FILED Dec 21, 2009 Secretary of State

y					
Current Principal Place of Business:			New Prince	New Principal Place of Business:	
SUITE 300	RLOCKEN BLV) ELD, CO 8002				
Current Mailing Address:			New Maili	New Mailing Address:	
SUITE 300	RLOCKEN BLV) ELD, CO 8002				
FEI Number:	: 95-1878805	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
1200 S PIN	ORATION SYS NE ISLAND RD ION, FL 33324)			
	named entity s e of Florida.	submits this statement for the p	urpose of changing i	ts registered office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:				IS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DONNELLY, MI	KEN CRESCENT, STE. 200	Title: Name: Address: City-St-Zip:	AS (X) Change () Addition SHIRRELL, ANGELA R 370 INTERLOCKEN BLVD, #300 BROOMFIELD, CO 80021	
Title: Name: Address: City-St-Zip:	BELL, REX A	Delete KEN BLVD, STE. 300 CO 80021	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	HARPER, DAVI	KEN CRESCENT, #200	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SKINNER, JOH	KEN CRESCENT, STE. 200	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	MCCONVILLE,	KEN BLVD, STE. 300	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	UHLER, ROBE	KEN CRES., STE. 200	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: ANGELA R. SHIRRELL AS 12/21/2009