2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State
05-01-2003 90135 042 ***158.75

DOCUMENT # 821699

1. Entity Name
MWH AMERICAS, INC.

11031409

Principal Place of Business	Mailing Address
300 - 370 INTERLOCKEN BLVD. BLOOMFIELD CO 80021	300 - 370 INTERLOCKEN BLVD. BLOOMFIELD CO 80021

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 95-1878805 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** 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.

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, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD TOLANEY, MURLI 300 N LAKE AVE, STE 1200 PASADENA CA 91101 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Murli Tolaney 300 N. Lake Ave., Ste.1200 Pasadena CA 91101 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVPS TAGGART, DAVID A 380 INTERLOCKEN CRESCENT, #200 BROOMFIELD CO 80021 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary David A. Taggart 380 Interlocken Cres., Ste.200 Broomfield CO 80021 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVPT HARPER, DAVID J 380 INTERLOCKEN CRESCENT, #200 BROOMFIELD CO 80021 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer/Chief Financial Offi David J.D. Harper 380 Interlocken Cres., Ste.200 Broomfield CO 80021 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS DONNELLY, MICHAEL 370 INTERLOCKEN BLVD. #300 BROOMFIELD CO 80021 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice Pres./Asst. Secretary Michael Donnelly 370 Interlocken Blvd., Ste.300 Broomfield CO 80021 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVPD EVENSON, DONALD E 1340 TREAT BLVD, STE 300 WALNUT CREEK CA 94596 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director/President Donald L. Smith 370 Interlocken Blvd., Ste.300 Broomfield CO 80021 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD UHLER, ROBERT B 380 INTERLOCKEN CRESCENT, #300 BROMFIELD CO 80021 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Robert B. Uhler 380 Interlocken Cres., Ste.200 Broomfield CO 80021 ☒ Change ☐ Addition

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: Michael Donnelly SIGNATURE REQUIRED Michael Donnelly 4-25-03 303-410-4000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Vice Pres./Asst. Secy. Date Daytime Phone #

CR2E034 (10/02)

000000656 FR