FILED Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90014 059 \*\*\*\*\*8.75

04-25-1999 90014 060 \*\*\*150.00

**PROFIT** . CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 830470

1. Corporation Name

Principal Place of Business

100 CALIFORINA ST

URS GREINER WOODWARD-CLYDE GROUP CONSULTANTS, IN

Mailing Address

100 CALIFORINA ST

SUITE 500 SAN FRANCISCO CA 94111		SUITE 500 SAN FRANCISCO CA 94111			DO NOT WRITE IN THIS SPACE						
	0 (A 2411)	GAIN THAIRCIGGO ON OTHER			3. Date Incorporated or Qualifed						
						07/17	7/ <b>197</b> 3				,
2. Principa Place of Business 2a. Mailing Address							4. FEI Number			Applied For	
21						11-19	11-1980241			Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	1			5. Certificate of Status Desired X \$8.75 A				75 A	lditional
22		27	27			э. Сепис	16 01 Status Desired	- JAI	Fe	e Rec	uired
City & State	e	City & State				6. Electio	Campaign Financing	' П	\$5.	.00 b	tay Be
23		28	28			Trust F	und Contribution		Adr	ded to	Fees
Zip	Courtry Zip		Col	untry		8. This co	rporation owes the cu	rrent year			_
24	25 29		30			1	Persor al Property Tax.  Yes KNo				
	9. Name and Address of Cur	rent Registered Agent		L		10. Name	and Address of New	Registere	d Agent		
				81	Name						
CORPORATION SERVICE COMPANY				82	82 Street Acdress (P.O. Box Number is Not Acceptable)						
1201 HAYS STREET				-							
TALL	AHASSEE FL 32301			83							
				84	014				. 85	Zip C:	
				54	City			F	L  °°	Zip C.	,de
office or r	to the provisions of Sections 607.0 egistered agent, or both, in the St m familiar with, and accept the ob	ate rif Florida. Such change w	as authorize	a bv	the corp	oc rporation submi oration's board of e	s this statement for the lirectors. I hereby according to the statement of the statement of the statement for the state	e purpose : ept the apr	of changin ointment a	ig its ri as regi	egistered stered
SIGNATUF E								DATE			
	Signature, typed or printed na ne of registered	again and the happing	<u>-</u> _		t signature	required when reinstating)	ONS/CHANGES TO O		AND DIRE	CTO	S IN 12
12.		ANI) DIRECTORS	13.			T	MS/CHANGES TO O	TTIQLING	Cha		Addition
TITLE	AS										
NAME	BRUMMERSTEDT, CAROL			IAME							
STREET ADDRESS	100 CALIFORNIA ST				ADDRESS						
CITY-ST-ZIP	SAN FRANCISCO CA			1.4 CITY-ST-ZIP		<u> </u>			Cha	ngo.	Addition
TITLE	D DELETE 2.17								ilige	["] Vadigori	
NAME	Koffel, Martin M		2.2 N	IAME							
STREET ADDRESS	100 CALIFORNIA ST		2.3 \$		ADDRESS						
CITY-ST-ZIP	SAN FRANCISCO CA			2 4 CITY-ST-ZIP		<u> </u>					C Addison
TITLE	sv	☐ DELET	E 31T	ITLE		<b>V</b>			🔏 Cha	inge	☐ Addition
NAME	BLOOM, MARVIN J		32 N	IAME							
STREET ADDRESS	100 CALIFORNIA ST		338	3 3 STREE							
CITY-ST-ZIP	SAN FRANCISCO CA			CITY-S	T-ZIP						
TITLE			E 41T	4.1 TITLE					Cha	inge	Addition
NAME	ROSENSTEIN, IRWIN L		4.21	NAME							
STREET ADDRESS	100 CALIFORNIA ST		4.3 S	TREET	ADDRESS						
CITY-ST-ZIP	SAN FRANCISCO CA		440	ITY-S	r-ZIP						
TITLE	DVSC	☐ DELET		TTLE		z/vs			<b>≰</b> Cha	ange	☐ Addition
NAME	AINSWORTH KENT P		5.2 N	NAME.		111					

14. I heret y 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 changer, or on an attachment with an address, with all other like empowered.

5 3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

62 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

100 CALIFORNIA ST

SAN FRANCISCO CA

TANZER, MARTIN S

100 CALIFORNIA ST

SAN FRANCISCO CA

☐ DELETE

☐ Addition