

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 849155

FILED
Apr 07, 2008
Secretary of State

Entity Name: BECHTEL CORPORATION

Current Principal Place of Business:

50 BEALE STREET
SAN FRANCISCO, CA 94105

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 193965
SAN FRANCISCO, CA 94119

New Mailing Address:

FEI Number: 94-2681914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VCPD () Delete
Name: ZACCARIA, ADRIAN
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA 94105

Title: EVPD () Delete
Name: LASPA, JUDE P
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA 94105

Title: VPSD () Delete
Name: MILLER, JUDITH A
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA 94105

Title: TREDA () Delete
Name: LEADER, KEVIN C
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA 94105

Title: SVPD () Delete
Name: OGILVIE, J. SCOTT
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA

Title: AC () Delete
Name: CARLSON, TED A
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SVPD (X) Change () Addition
Name: LASPA, JUDE P
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA 94105

Title: SEC (X) Change () Addition
Name: QUAZZO, MARY W
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA 94105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SVPD (X) Change () Addition
Name: ADAMS, MICHAEL A
Address: 50 BEALE STREET
City-St-Zip: SAN FRANCISCO, CA

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TED A CARLSON

AC

04/07/2008

Electronic Signature of Signing Officer or Director

Date