

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 05, 2003 8:00 am**  
**Secretary of State**

05-05-2003 91426 006 \*\*\*150.00

**DOCUMENT # 855550**

1. Entity Name  
**CB&I CONSTRUCTORS, INC.**



Principal Place of Business  
**1501 N DIVISION  
PLAINFIELD IL 60544  
US**

Mailing Address  
**1501 N DIVISION  
PLAINFIELD IL 60544  
US**



2. Principal Place of Business  
**8701 New Trails Drive**  
Suite, Apt. #, etc.

**Suite 200**  
City & State

**The Woodlands, TX**  
Zip Country  
**77381 US**

3. Mailing Address  
**8701 New Trails Drive**  
Suite, Apt. #, etc.

**Suite 200**  
City & State

**The Woodlands, TX**  
Zip Country  
**77381 US**

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **36-3046868**

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**

**7. Name and Address of New Registered Agent**

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 \_\_\_\_\_ (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**

TITLE	PD	<input type="checkbox"/> Delete
NAME	<b>CRAIN, STEPHEN P</b>	
STREET ADDRESS	<b>1450 LAKE ROBBINS DR.</b>	
CITY-ST-ZIP	<b>THE WOODLANDS TX 77380</b>	
TITLE	VPAT	<input checked="" type="checkbox"/> Delete
NAME	<b>BROWN, M. JEAN</b>	
STREET ADDRESS	<b>337 SCOTT AVE</b>	
CITY-ST-ZIP	<b>GLEN ELLYN IL 60137</b>	
TITLE	S	<input type="checkbox"/> Delete
NAME	<b>AVRIL, G.L.</b>	
STREET ADDRESS	<b>813 S. QUINCY</b>	
CITY-ST-ZIP	<b>HINSDALE IL</b>	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	<b>RHODES, TOMMY C</b>	
STREET ADDRESS	<b>3404 DORCHESTER COURT</b>	
CITY-ST-ZIP	<b>SUGAR LAND TX 77478</b>	
TITLE	CD	<input type="checkbox"/> Delete
NAME	<b>GLENN, GERALD M</b>	
STREET ADDRESS	<b>1450 LAKE ROBBINS DRIVE</b>	
CITY-ST-ZIP	<b>THE WOODLANDS TX 77380</b>	
TITLE	T	<input type="checkbox"/> Delete
NAME	<b>MORAN, TIMOTHY J P</b>	
STREET ADDRESS	<b>1501 NO DIVISION STREET</b>	
CITY-ST-ZIP	<b>PLAINFIELD IL 60544</b>	

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Stephen P. Crain</b>	
STREET ADDRESS	<b>15 Baronial Circle</b>	
CITY-ST-ZIP	<b>The Woodlands, TX 77382</b>	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>Tommy C. Rhodes</b>	
STREET ADDRESS	<b>3403 Dorchester Court</b>	
CITY-ST-ZIP	<b>Sugarland, TX 77478</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Dir	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Gerald M. Glenm</b>	
STREET ADDRESS	<b>23 Cypress Lake Place</b>	
CITY-ST-ZIP	<b>The Woodlands, TX 77382</b>	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Timothy J.P. Moran</b>	
STREET ADDRESS	<b>11 Meadow Cove Drive</b>	
CITY-ST-ZIP	<b>The Woodlands, TX 77381</b>	

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: SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)

*Attachment* *80110645*  
*#855550*  
CORPORATION DESCRIPTIVE INFORMATION

Code: 121\*

Name: CB&I CONSTRUCTORS, INC.

Employee ID: 36-3046868

Corporate Officers

Officer Name	STEPHEN P. CRAIN
Street Address	15 BARONIAL CIRCLE
City	THE WOODLANDS
State	TX
Zip	77382
SSN	355-48-8762
Title	PRESIDENT
Officer Name	TOMMY C. RHODES
Street Address	3403 DORCHESTER COURT
City	SUGAR LAND
State	TX
Zip	77478
SSN	459-80-9198
Title	VICE PRESIDENT
Officer Name	GARY L. AVRIL
Street Address	813 S. QUINCY
City	HINSDALE
State	IL
Zip	60521
SSN	360-38-6316
Title	SECRETARY
Officer Name	TIMOTHY J. P. MORAN
Street Address	11 MEADOW COVE DRIVE
City	THE WOODLANDS
State	TX
Zip	77381
SSN	357-96-0437
Title	TREASURER

*Attachment*

*80110645*  
*#855550*

**CORPORATION DESCRIPTIVE INFORMATION**

**CB&I CONSTRUCTORS, INC. - DIRECTORS**

**EMPLOYEE ID: 36-3046868**

**GERALD M. GLENN**  
23 CYPRESS LAKE PLACE  
THE WOODLANDS, TX 77382

**RICHARD E. GOODRICH**  
3 OAKLEY DOWNS  
THE WOODLANDS, TX 77382

**ROBERT B. JORDAN**  
38 NORTH PROVENCE CIRCLE  
THE WOODLANDS, TX 77382