

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 06, 2003 8:00 am**  
**Secretary of State**

05-06-2003 90035 045 \*\*\*150.00

0668844 AB

DOCUMENT # F00000005874

1. Entity Name

~~STONE & WEBSTER CONSULTANTS, INC.~~

Stone + Webster Management Consultants,

Principal Place of Business  
8545 UNITED PLAZA BOULEVARD  
BATON ROUGE LA 70809

Mailing Address  
8545 UNITED PLAZA BOULEVARD  
BATON ROUGE LA 70809

2. Principal Place of Business

3. Mailing Address

4171 Essen Lane

4171 Essen Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Baton Rouge LA

City & State

Baton Rouge LA

Zip 70809 Country USA

Zip 70809 Country USA

4. FEI Number 72-1483442

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

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 PD  
NAME DELGADO, REYNOLDS M  
STREET ADDRESS 1430 ENCLAVE PARKWAY  
CITY-ST-ZIP HOUSTON TX 77077 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD  
NAME GILL, RICHARD F  
STREET ADDRESS 8545 UNITED PLAZA  
CITY-ST-ZIP BATON ROUGE LA 70809 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 4171 Essen Lane  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE VT  
NAME BELK, ROBERT L  
STREET ADDRESS 8545 UNITED PLAZA  
CITY-ST-ZIP BATON ROUGE LA 70809 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 4171 Essen Lane  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE S  
NAME GRAPHIA, GARY P  
STREET ADDRESS 8545 UNITED PLAZA BLVD.  
CITY-ST-ZIP BATON ROUGE LA 70809 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 4171 Essen Lane  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ 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, without other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-03

Date

(225) 932-2500

Daytime Phone #

CR2E034 (10/02)