FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Apr 29, 2002 8:00 am Secretary of State DOCUMENT # F01000002771 1. Entity Name BEAUDIN GANZE CONSULTING ENGINEERS, INC. 04-29-2002 90173 048 ***150 Principal Place of Business Mailing Address PO BOX 39 PO BOX 39 KAAAAAAAT VAIL CO 81658 **VAIL CO 81658** 2. Principal Place of Business 3. Mailing Address **我们感觉。** Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 84-1177168 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE BEAUDIN, DENIS M NAME NAME Beaver Crock Blud. Suite 200 STREET ADDRESS 110 E BEAVER CREEK BLVD., STE 202 STREET ADDRESS ۶. 110 CITY-ST-ZIP **AVON CO** CO 8/680 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME SEALS, TYLER NAME STREET ADDRESS 110 E BEAVER CREEK BLVD., STE 202 STREET ADDRESS CITY-ST-7IP AVON CO CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME LYLE, DAVID-STREET ADDRESS 110 E BEAVER CREEK BLVD., STE 202 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP AVON CO TITLE Delete TITLE ☐ Change ☐ Addition NAME HERRERA, EDWARD NAME STREET ADDRESS 14142 DENVER WEST PKWY STE 195 STREET ADDRESS CITY-ST-ZIP **GOLDEN CO** CITY-ST-ZIP TITLE Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS te 200 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE □ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. 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 11 or Block 12 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

with all other like empowered