2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000003735

Entity Name: AECOM INFRASTRUCTURE, INC.

FILED Apr 21, 2004 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:			
30 HARVARD MILL SQ. WAKEFIELD, MA 01880				701 EDGEWATER DRIVE WAKEFIELD, MA 01880			
Current Mailing Address:				New Mailing Address:			
30 HARVARD MILL SQ. WAKEFIELD, MA 01880				701 EDGEWATER DRIVE WAKEFIELD, MA 01880			
FEI Number: 95-4834083 FEI Number Applied For ()				Number Not Applicable () Certificate of Status Desired ()			
Name and	Address of C	Current Registered Agent:		Name and	Address of N	lew Registered	Agent:
1200 SOU	PORATION SY TH PINE ISLA ON, FL 33324	ND ROAD					
	named entity e of Florida.	submits this statement for the p	urpose of	f changing i	ts registered o	office or registere	ed agent, or both,
SIGNATUR	RE:						
	Electror	nic Signature of Registered Age	nt			Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD (SOMERVILLE, 30 HARVARD N WAKEFIELD, N	/IILL SQUARE		Title: Name: Address: City-St-Zip:	PD (X SOMERVILLE, 701 EDGEWAT WAKEFIELD, M	TER DRIVE	on
Title: Name: Address: City-St-Zip:	V (POUND E, CI 701 B STREET SAN DIEGO, C	, SUITE 1100		Title: Name: Address: City-St-Zip:	()) Change ()Additio	on
Title: Name: Address: City-St-Zip:	LAMBECK, DE	R ST. STE 1100		Title: Name: Address: City-St-Zip:	()) Change ()Additio	on
Title: Name: Address: City-St-Zip:	T (MORRISON, D 30 HARVARD N WAKEFIELD, N	/IILL SQUARE		Title: Name: Address: City-St-Zip:	T (X MORRISON, D 701 EDGEWAT WAKEFIELD, M	TER DRIVE	on
Title: Name: Address: City-St-Zip:	* .			Title: Name: Address: City-St-Zip:	()) Change ()Additio	on
Title: Name: Address: City-St-Zip:	FISCHER, ROE	R DRIVE, SUITE 600		Title: Name: Address: City-St-Zip:	()) Change ()Additio	on

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DENNIS J. MORRISON TREA 04/21/2004