2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F02000003122

Entity Name: EMCOD EACH ITIES SEDVICES

FILED Mar 08, 2006 Secretary of State

Entity Name: EMCOR FACILITIES SERVICES, INC. **Current Principal Place of Business: New Principal Place of Business:** 320 23RD STREET SOUTH SUITE 100 ARLINGTON, VA 22202 **New Mailing Address: Current Mailing Address:** 301 MERRITT SEVEN NORWALK, CT 06851 FEI Number: 06-1455467 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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 **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFOP () Delete () Change () Addition Name: RODGERS, WILLIAM A JR Name: 320 23RD STREET SOUTH, SUITE 100 Address: Address: City-St-Zip: ARLINGTON, VA 22202 City-St-Zip: Title: VP/D Title: () Delete () Change () Addition Name: MATZ, R. KEVIN Name: 301 MERRITT SEVEN Address: Address: NORWALK, CT 06851 City-St-Zip: City-St-Zip: Title: Title: VP.) Delete () Change () Addition LINDEN, JED Name: Name: 301 MERRITT SEVEN Address: Address: City-St-Zip: NORWALK, CT 06851 City-St-Zip: Title: VP/S () Delete Title: VP/S (X) Change () Addition SPERA, JOHNNA I SPERA, JOHNNA S Name: Name: Address: 320 23RD STREET SOUTH, SUITE 100 Address: 320 23RD STREET SOUTH, SUITE 100 City-St-Zip: ARLINGTON, VA 22202 City-St-Zip: ARLINGTON, VA 22202 Title: Title: () Change (X) Addition () Delete SHERBER, MICHAEL S Name: Name: 320 23RD STREET SOUTH, SUITE 100 Address: Address: City-St-Zip: City-St-Zip: ARLINGTON, VA 22202 Title: () Delete Title: () Change (X) Addition Name: Name: BORDES, MICHAEL P 320 23RD STREET SOUTH, SUITE 100 Address: Address: City-St-Zip: City-St-Zip: ARLINGTON, VA 22202

I hereby certify that the information supplied with this filing does not qualify for the 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: JOHNNA S. SPERA VP/S 03/08/2006