PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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DOCUMENT # F030000 03602 1. Corporation Name								SECHLIA STATE TALLAHASSEE, FLORIDA					
2. Princip	eal Office Addr	1 Brother's Mov	500103223855 05/24/07-01061-006 **458.75 REINSTATEMENT 05~7 CR25081 (1/07)										
718 Creek Ridge Road P.O. Box 16204 Suita, Apt. #, etc. Suita, Apt. #, etc.								4. Date incorporated or Qualified To Do Business in Florids 7/21/2003					
City & State Greensboro NC 27406 Greens Zip Country Zip				sboro NC			5. FEI Numi	5. FEI Number 56–1735496			Applied For Not Applicable		
274	106	Guilford	27416		Gu	ilford	CERTIFICA	TE OF STATUS DESIRED			al Fee required ate of Status		
Name Harriet Weaver Street Address (P.O. Box Number is Not Acceptable) 584 Palm Springs Drive Sutte, Apt. #, Etc. City Altamonte Springs FL 32701							The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.						
Signature of Registered	of .	e registered agent of the ab	A / 3	lai	بور		obligations of sec	Dats	G, F.S. 4/6	/c	7_		
9. Name	and Street A	ddresses of Each Officer an	d/or Director (Florid	a nonprofit	<u>-</u> -		<u> </u>		-				
Titles		Name of Officers and/or Directors	·			neet Address of Eac ficer and for Direct		City	// State / Z	P			
P	Danny Mitchell			2203 Cabin Court				Greensboro	NC 2	2740)6		
V	Darre	ll Mitchell	:	2001 N	Mort	h Bay		Browns Summ	nit M	2 2	27414		
S	Donna	Gladney		3603 F	ert	land Trail	1	Greensboro	NC	274	405		
T	Tonya	Mitchell	:	2203 C	abi	n Court		Greensboro	NC 2	2740)6		
10 ;	y that I am an	officer or director or the rece	EINSTAT	EME	N	this application on	promote for in the	print 617 or 617 E 9 16	inther coutiff.	thet w	ethan filles		
this ne	instatement ap by the corpora	omicer or director or the rece plication, the reason for disa tion have been paid and the true and accurate, and my s	plution has been eli names of individual:	minated, th s listed on t	e corp this for	orate name satisfie m do not qualify for	s the requirement an examption co	s of section 607.0401 or 6	317.0401, F	.S., th	et ell foes		

ATTACHMENT TETRA TECH NUS, INC.



OFFICERS AND DIRECTORS OF THE CORPORATION

COMPLETE BUSINESS MAILING ADDRESS

TITLE	NAME	Street	City	State	Zip Code
ASSISTANT VICE PRESIDENT	Amold Ostrofsky, P.E.	55 Jonspin Road	Wilmington,	MA	01887
ASSISTANT VICE PRESIDENT	John J. Trepanowski, P.E.	600 Clark Ave., Suite 3	King of Prussia,	PA	19406
ASSISTANT TREASURER	Teresa M. Dieguez	3475 East Foothill Blvd.	Pasadena,	CA	91107
DIRECTOR	Richard H. Truly	3475 East Foothill Blvd.	Pasadena,	CA	91107

Last updated: 3/2/2007