

2010 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 08, 2010
Secretary of State

Entity Name: CH2M HILL E&C, INC.

Current Principal Place of Business:

9191 S. JAMAICA ST.
ENGLEWOOD, CO 80112 US

New Principal Place of Business:

Current Mailing Address:

9191 S. JAMAICA ST.
ATTN: TAX DEPT
ENGLEWOOD, CO 80112 US

New Mailing Address:

FEI Number: 56-2418388 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D
Name: CAMPBELL, RONALD A
Address: 9191 S JAMAICA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: VP/S
Name: MCLEAN, MARGARET B
Address: 9191 S JAMAICA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: D
Name: SANTEE, M. CATHERINE
Address: 9191 S. JAMAICA ST
City-St-Zip: ENGLEWOOD, CO 80112

Title: P
Name: HIGDEM, GARRY M
Address: 9191 S. JAMAICA ST.
City-St-Zip: ENGLEWOOD, CO 80112

Title: SVP
Name: LEMMON, GEORGE N
Address: 2020 SW 4TH AVE., 3RD FLR
City-St-Zip: PORTLAND, OR 97201

Title: AVP
Name: LATHEN, ROBERT L
Address: 9191 S. JAMAICA ST.
City-St-Zip: ENGLEWOOD, CO 80112

I hereby 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 all other like empowered.

SIGNATURE: ROBERT L. LATHEN

AVP

04/08/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date