2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001431

Entity Name: MACTEC DEVELOPMENT CORPORATION

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1105 LAKEWOOD PKWY 1105 LAKEWOOD PKWY SUITE 300 SUITE 300 ALPHARETTA, GA 30004 ALPHARETTA, GA 30009 **Current Mailing Address: New Mailing Address:** 1105 LAKEWOOD PKWY 1105 LAKEWOOD PKWY SUITE 300 SUITE 300 ALPHARETTA, GA 30004 ALPHARETTA, GA 30009 FEI Number: 84-1505830 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition COLES, BRUCE C MASSEY, ANN E Name: Name: 1105 SANCTUARY PARKWAY, SUITE 300 1105 SANCTUARY PARKWAY, SUITE 300 Address: Address: City-St-Zip: ALPHARETTA, GA 30004 City-St-Zip: ALPHARETTA, GA 30009 Title: Title: () Delete (X) Change () Addition MASSEY, ANN E Name: Name: MASSEY, ANN E 1431 CENTERPOINT BLVD STE 150 1105 LAKEWOOD PARKWAY, SUITE 300 Address: Address: KNOXVILLE, TN 379321904 ALPHARETTA, GA 30009 City-St-Zip: City-St-Zip: Title: (X) Change () Addition Title: () Delete COLES, BRUCE C KIBLER, JAMES A JR Name: Name: 1105 LAKEWOOD PKWY STE 300 1105 LAKEWOOD PKWY STE 300 Address: Address: City-St-Zip: ALPHARETTA, GA 30004 City-St-Zip: ALPHARETTA, GA 30009 () Delete Title: Title: (X) Change () Addition REID, BILLY E JR REID, BILLY E JR Name: Name: Address: 97B MIDWAY LANE Address: 105 FORDHAM ROAD City-St-Zip: City-St-Zip: OAKRIDGE, TN 37830 OAK RIDGE, TN 37830 Title: Title: (X) Change () Addition () Delete SLAMAN, WILLIAM D Name: SLAMAN, WILLIAM D Name: 1105 SANCTUARY PARKWAY, SUITE 300 Address: 1105 SANCTUARY PARKWAY, SUITE 300 Address: City-St-Zip: ALPHARETTA, GA 30004 City-St-Zip: ALPHARETTA, GA 30009 () Delete Title: Title: (X) Change () Addition MASSEY, ANN Name: Name: DUKE, BRUCE A 1431 CENTERPOINT BLVD STE 150 1105 LAKEWOOD PARKWAY SUITE 300 Address: Address: City-St-Zip: KNOXVILLE, TN 379321984 City-St-Zip: ALPHARETTA, GA 30009

I hereby certify that the information supplied with this filing does not qualify 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: BRUCE A. DUKE AS 01/14/2009