

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000001477

FILED
Feb 09, 2006
Secretary of State

Entity Name: GEOTECHNICAL DESIGN SERVICES, INC.

Current Principal Place of Business:

9265-B REDWOOD ROAD
WEST JORDAN, UT 84088

New Principal Place of Business:

6000 SOUTH FASHION BLVD
210
MURRAY, UT 84107

Current Mailing Address:

6000 SOUTH FASHION BLVD, SUITE 210
MURRAY, UT 84107

New Mailing Address:

6000 SOUTH FASHION BLVD, SUITE 210
210
MURRAY, UT 84107

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: PCD () Delete
Name: BISHOP, JEROLD
Address: 489 EAST MONTE COURT
City-St-Zip: SALT LAKE CITY, UT 84115

Title: VD () Delete
Name: DEBERNARDI, BRET
Address: 8321 SOUTH JERRY WAY
City-St-Zip: WEST JORDAN, UT 84088

Title: ST () Delete
Name: ERICKSON, TRESA
Address: 5493 SOUTH TROPICANA
City-St-Zip: TAYLORSVILLE, UT 84118

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: DEBERNARDI, BRET
Address: 8321 SOUTH JERRY WAY
City-St-Zip: WEST JORDAN, UT 84088

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: TRESA ERICKSON

ST

02/09/2006

Electronic Signature of Signing Officer or Director

Date