


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2008 8:00 am
Secretary of State

02-25-2008 90044 047 ***158.75

DOCUMENT # F05000004576

1. Entity Name
SKANSKA USA INC.



Principal Place of Business Mailing Address
16-16 WHITESTONE EXPRESSWAY **16-16 WHITESTONE EXPRESSWAY**
WHITESTONE, NY 11357 **WHITESTONE, NY 11357**

2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country



02072008 Chg-P CR2E034 (12/06)

4. FEI Number Applied For
13-2700122 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required-**

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PCEO	<input type="checkbox"/> Delete
NAME	GRAHAM, STUART E	
STREET ADDRESS	16-16 WHITESTONE EXPRESSWAY	
CITY-ST-ZIP	WHITESTONE, NY 11357	
TITLE	VCFO	<input checked="" type="checkbox"/> Delete
NAME	ANDERSSON, HANS	
STREET ADDRESS	16-16 WHITESTONE EXPRESSWAY	
CITY-ST-ZIP	WHITESTONE, NY 11357	
TITLE	S	<input type="checkbox"/> Delete
NAME	WITHERS, JOHN S JR.	
STREET ADDRESS	16-16 WHITESTONE EXPRESSWAY	
CITY-ST-ZIP	WHITESTONE, NY 11357	
TITLE	T	<input type="checkbox"/> Delete
NAME	ROSS, BARRY M	
STREET ADDRESS	16-16 WHITESTONE EXPRESSWAY	
CITY-ST-ZIP	WHITESTONE, NY 11357	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	HUFFMAN, B. KEITH	
STREET ADDRESS	16-16 WHITESTONE EXPRESSWAY	
CITY-ST-ZIP	WHITESTONE, NY 11357	
TITLE	CD	<input type="checkbox"/> Delete
NAME	GRAHAM, STUART E	
STREET ADDRESS	16-16 WHITESTONE EXPRESSWAY	
CITY-ST-ZIP	WHITESTONE, NY 11357	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANDERSSON HANS	
STREET ADDRESS	16-16 WHITESTONE EXPWY	
CITY-ST-ZIP	WHITESTONE, NY 11357	
TITLE	D VCFO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EK CONNY	
STREET ADDRESS	16-16 WHITESTONE EXPWY	
CITY-ST-ZIP	WHITESTONE NY 11357	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	O'SHEA JIM	
STREET ADDRESS	16-16 WHITESTONE EXPWY	
CITY-ST-ZIP	WHITESTONE, NY 11357	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **JOHN S. WITHERS, JR.** **SECRETARY** **FEB. 7, 2008** 203-
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 301-5945