

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90035 047 ***158.75

DOCUMENT # F93000000352

1. Entity Name

SVERDRUP CIVIL, INC.

Principal Place of Business

Mailing Address

**13723 RIVERPORT DR.
MARYLAND HEIGHTS MO 63043**

**13723 RIVERPORT DR.
MARYLAND HEIGHTS MO 63043**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

43-1621641

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **C** ☒ Delete
NAME **BEUMER, R E**
STREET ADDRESS **13013 WHEATFIELD FARM RD**
CITY-ST-ZIP **TOWN & COUNTRY MO**

TITLE **S.R. VP** ☐ Change ☒ Addition
NAME **GARY E. BRASSER**
STREET ADDRESS **437 SHETLAND VALLEY CT**
CITY-ST-ZIP **CHESTERFIELD, MO 63005**

TITLE **PD** ☐ Delete
NAME **SCHWARTZ, H. GERARD JR.**
STREET ADDRESS **10 DEERFIELD**
CITY-ST-ZIP **ST. LOUIS MO 63124**

TITLE **VP - FINANCE** ☐ Change ☒ Addition
NAME **JEFFREY M. GOLDFARB**
STREET ADDRESS **1420 HIGHLAND VALLEY CIRCLE**
CITY-ST-ZIP **WILDWOOD, MO 63005**

TITLE **SVP** ☒ Delete
NAME **BUESCHER, A J**
STREET ADDRESS **15500 PEACH HILL CT**
CITY-ST-ZIP **CHESTERFIELD MD 63011**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **RICHARD J. SLATER**
STREET ADDRESS **1235 HILLOREST AVE**
CITY-ST-ZIP **PASADENA, CA 91106**

TITLE **AS** ☒ Delete
NAME **MORRISON, A.S.**
STREET ADDRESS **12150 BENT BROOK RD.**
CITY-ST-ZIP **DES PERES MO**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VPC** ☒ Delete
NAME **HOWELL, G J**
STREET ADDRESS **881 MEADOW VIEW**
CITY-ST-ZIP **COLUMBIA IL 62236**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GARY E. BRASSER **GARY E. BRASSER**

Date

Daytime Phone #

314-720-4720

CR2E034 (10/00)