

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90077 043 ***158.75

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1. Entity Name
JACOBS CIVIL INC.



Principal Place of Business
**501 NORTH BROADWAY
SAINT LOUIS, MO 63102**

Mailing Address
**PO BOX 7084
PASADENA, CA 91109-7084**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04142004

Chg-P

CR2E034 (10/03)

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

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
ALLEN, WILLIAM H
1100 N. GLEBE RD STE 500
ARLINGTON, Y** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Chief Operating Officer
Taylor, Allyn B.
1041 E. Butler Road
Greenville, SC 29607** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AS
GOLDFARB, JEFF M
501 N. BROADWAY
SAINT LOUIS, MO 63102** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AT
Goldfarb, Jeff M.** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
MARKLEY, W.C.
1111 S ARROYO PKWY
PASADENA, CA 91105** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Hammond, Thomas R.
1111 S. Arroyo Parkway
Pasadena, CA 91105** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
PROSSOR, J.W.
1111 S ARROYO PKWY
PASADENA, CA 91105** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Martin, Craig L.
1111 S. Arroyo Parkway
Pasadena, CA 91105** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COF
HIGGINS, MICHAEL J
501 N. BROADWAY
SAINT LOUIS, MO 63102** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**AS
Scott, James J.
501 N. Broadway
Saint Louis, MO 63102** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John W. Prosser, Jr. 04/19/2004

Treasurer

Date

(626) 578-3500

Daytime Phone #