

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F94000004021**

1. Corporation Name

**HARDING LAWSON ASSOCIATES INFRASTRUCTURE, INC.**

Principal Place of Business

**411 108TH AVE. NE.  
STE 400  
BELLEVUE WA 9800A  
US**

Mailing Address

**7655 REDWOOD BLVD  
NAVATO CA 94945  
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

3. Date Incorporated or Qualified

**08/02/1994**

4. FEI Number

**68-0331137**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

Trust Fund Contribution

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

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐ Yes

☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C ☒ DELETE

NAME **SCHREUDER, DONALD L**  
STREET ADDRESS **7655 REDWOOD BLVD.**  
CITY-ST-ZIP **NOVATO CA 94945**

TITLE DP ☐ DELETE

NAME **LIMAYE, PRAKASH V**  
STREET ADDRESS **411 108TH AVE. NE., STE 400**  
CITY-ST-ZIP **BELLEVUE WA**

TITLE DS ☐ DELETE

NAME **ENGLAND, PATRICIA A**  
STREET ADDRESS **7655 REDWOOD BLVD.**  
CITY-ST-ZIP **NOVATO CA 94945**

TITLE T ☐ DELETE

NAME **THORNTON, GREGORY A**  
STREET ADDRESS **7655 REDWOOD BLVD.**  
CITY-ST-ZIP **NOVATO CA 94945**

TITLE VP ☐ DELETE

NAME **DYKINS, STUART E.**  
STREET ADDRESS **961 MATLEY LANE, STE 110**  
CITY-ST-ZIP **RENO NV**

TITLE V ☐ DELETE

NAME **MUJIB, AHMED**  
STREET ADDRESS **411 108TH AVE. NE., STE 400**  
CITY-ST-ZIP **BELLEVUE WA**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☐ Change ☒ Addition

1.2 NAME **Corvino, Claude**  
1.3 STREET ADDRESS **411 108th Ave. NE #400**  
1.4 CITY-ST-ZIP **Bellevue, WA 98004**

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE **CVT** ☒ Change ☐ Addition

4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 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

**1/15/99**

Date

**(415) 899-8817**

Daytime Phone #

CR2E034 (1/98)

0580/32

**FILED**  
**Mar 02, 1999 8:00 am**  
**Secretary of State**

03-02-1999 90058 008 \*\*\*150.00



DO NOT WRITE IN THIS SPACE