

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000628

FILED
Apr 16, 2007
Secretary of State

Entity Name: FLUOR FACILITY & PLANT SERVICES, INC.

Current Principal Place of Business:

ONE ENTERPRISE DRIVE
F2B
ALISO VIEJO, CA 92656 US

New Principal Place of Business:

100 FLUOR DANIEL DRIVE
GREENVILLE, SC 29607 US

Current Mailing Address:

ONE ENTERPRISE DRIVE
F2B
ALISO VIEJO, CA 92656 US

New Mailing Address:

100 FLUOR DANIEL DRIVE
GREENVILLE, SC 29607 US

FEI Number: 57-0797431

FEI Number Applied For ()

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: P () Delete
Name: STEVENS, M. A.
Address: ONE ENTERPRISE DR.
City-St-Zip: ALISO VIEJO, CA 92656

Title: CFO () Delete
Name: STEUERT, D M
Address: ONE ENTERPRISE DRIVE
City-St-Zip: ALISO VIEJO, CA 92656

Title: VP () Delete
Name: HULL, S F
Address: ONE ENTERPRISE DRIVE
City-St-Zip: ALISO VIEJO, CA 92656

Title: D () Delete
Name: FISHER, L N
Address: ONE ENTERPRISE DRIVE
City-St-Zip: ALISO VIEJO, CA 92656

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GRIMES, K.D.
Address: 6700 LAS COLINAS BOULEVARD
City-St-Zip: IRVING, TX 75039

Title: CFO (X) Change () Addition
Name: STEUERT, D M
Address: 6700 LAS COLINAS BOULEVARD
City-St-Zip: IRVING, TX 75039

Title: VPS (X) Change () Addition
Name: FISHER, L.N.
Address: 6700 LAS COLINAS BOULEVARD
City-St-Zip: IRVING, TX 75039

Title: D (X) Change () Addition
Name: FISHER, L N
Address: 6700 LAS COLINAS BOULEVARD
City-St-Zip: IRVING, TX 75039

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: L.N. FISHER

VPS

04/16/2007

Electronic Signature of Signing Officer or Director

Date