FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90179 050 \*\*\*150.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9500005147

1. Corporation Name

CH2M H	ILL INTERNATIONAL SERV	ices, inc.					
Principal Plac	e of Business	Mailing Address				)	9;01; 1001 1001
6060 S. WILLOW DRIVE P.O. BOX 22508							
GREENWOOD VILLAGE CO 80111-5142 DENVER CO 80222					DO NOT WOLFS IN T	LIC CDACE	
					DO NOT WRITE IN T	- IS SPACE	
					3. Date Incorporated or Qualifed		
2 5 : : : :		2n Mailing Address			10/23/1995 4. FEI Number	An	priled For
Z- Principal P	lace of Business	2a. Mailing Address				·	ot Applicable
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.			93-0750969	\$8.75 A	
3uite, A 3i. #, etc.		27			5. Certifc ate of Status Desired	Fee Re	
City & Stat		City & State	=		6. Election Campaign Financing	\$5.00	May Be
23		28			Trust F und Contribution	Added t	, I
Zip	Cour try	Zip	Country		8. This corporation owes the current year		
24	25 29 30		30		Persor al Property Tax.	Yes	[]No
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Register	ed Agent	
			81	Name			
C T CORPORATION SYSTEM			82	Street Ac d	dress (P.O. Box Number is Not Acceptable)		
1200 SOUTH PINE ISLAND ROAD							
PLA	ntation fl 33324		83				
			84	City		85 Zip (	Code
				,	-	<b>-</b> L	
office or r	to the provisions of S∈ctions 607.05 registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was au	Ithorized by	the corporati	poration submi's this statement for the purposi ion's board of clirectors. I hereby accept the ap	) of changing its it ointment as re	g stered
SIGNATURE							
12.	Signature, typed or printed na ne of registered ag	<u></u>	Registered Agen	t signature requir	red when reinstating) DATE ADDITI()NS/CHANGES TO OFFICERS		DRS IN 12
TITLE	PD	NI) DIRECTORS	1 1 TITLE		NOTE NOTE IN THE PARTY OF THE P	Change	Addition
	ZEIEN, CRAIG T		12 NAME				}
NAME	SEAS ADDOCTOR DONE		1.3 STREET	ADDECC			
STREET ADDRESS	LITTLETON CO 80121						ŀ
CITY-ST-ZIP	D D	DELETE	1.4 CITY-ST 2.1 TITLE	1-219		Change	Addition
TITLE	T		2.2 NAME				_
NAME	PETERSON, RALPH R 82 FALCON HILLS DRIVE		2.3 STREET	ADDRESS			
STREET ADDRESS	HIGHLANDS RANCH CO 8012	oe Oe	2.4 CITY-S	}			İ
TITLE	AS		3.1 TITLE	-		Change	Addition
NAME	MCADAMS, ELIZABETH A		3.2 NAME				
STREET ADDRESS	TOOL BULLEDING OF COURT		3.3 STREET	ADDRESS			}
CITY-ST-ZIP	PARKER CO 80134		3.4. CITY-S	1			}
TITLE	T	☐ DELETE	41 TITLE	-		☐ Change	☐ Addition
NAME	NELSON, L L		4.2 NAME				
STREET ADDRESS		WAY	4.3 STREET	ADDRESS			}
CITY-ST-ZIP	ALOTE POLICE OF SOLO		4.4 CITY-S				
TITLE	D	DELETE 5:				Change	Addition
NAME	SANTEE, M. CATHERINE		5.2 NAME				
STREET ADDRESS	THE PERSON CALLS		53 STREET	ADDRESS			
CITY-ST-ZIP	LONETREE CO 80124		5.4 CITY- S	T-ZIP			
TITLE	LUNCHIEL OU OUIST	☐ DELETE	6 1 TITLE			Change	Addition
NAME	]		62 NAME				İ

14. I hereby certify that the information supplied with this filing does not qualify fir the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is 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 truetee empowered to execute this report as recuired by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or or an attachment with an address with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRE IS

CITY-ST-ZIP