

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003479

FILED
Apr 23, 2008
Secretary of State

Entity Name: CH2M HILL IDC FACILITIES SERVICES, INC.

Current Principal Place of Business:

2020 SW 4TH AVENUE 3D FLOOR
PORTLAND, OR 972014958

New Principal Place of Business:

2020 SW 4TH AVE., 3RD FLR
PORTLAND, OR 972014958

Current Mailing Address:

2020 SW 4TH AVENUE 3D FLOOR
PORTLAND, OR 972014958

New Mailing Address:

9191 S. JAMAICA ST.
ATTN: TAX
ENGLEWOOD, CO 80112

FEI Number: 93-1227118

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION, FL 33324 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,D () Delete
Name: SUSAN, KING
Address: 2020 SW 4TH AVENUE 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

Title: STD () Delete
Name: KING, SUSAN D
Address: 2020 SW 4TH AVENUE 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

Title: DV () Delete
Name: MERVIN, JEFF
Address: 2020 SW 4TH AVENUE 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: KING, SUSAN D
Address: 2020 SW 4TH AVE., 3RD FLR
City-St-Zip: PORTLAND, OR 97201

Title: S,T (X) Change () Addition
Name: KING, SUSAN D
Address: 2020 SW 4TH AVE., 3RD FLR
City-St-Zip: PORTLAND, OR 97201

Title: DV (X) Change () Addition
Name: MERVIN, JEFF
Address: 2020 SW 4TH AVE., 3RD FLR
City-St-Zip: PORTLAND, OR 97201

Title: AVP () Change (X) Addition
Name: LATHEN, ROBERT L
Address: 9191 S. JAMAICA ST.
City-St-Zip: ENGLEWOD, CO 80112

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT L LATHEN

AVP

04/23/2008

Electronic Signature of Signing Officer or Director

Date