

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F98000001104

Entity Name: ARCADIS U.S., INC.

FILED
Sep 25, 2008
Secretary of State

Current Principal Place of Business:

630 PLAZA DRIVE
SUITE 200
HIGHLANDS RANCH, CO 80129

New Principal Place of Business:

Current Mailing Address:

ATTN: LEGAL
P.O. BOX 66
SYRACUSE, NY 13214

New Mailing Address:

FEI Number: 57-0373224 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 ROAD
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

OFFICERS AND DIRECTORS:

Title: CEOD () Delete
Name: BLAKE, STEVEN B
Address: 630 PLAZA DRIVE, SUITE 200
City-St-Zip: HIGHLANDS RANCH, CO 80129

Title: CFOD () Delete
Name: DYKE, PETER G
Address: 630 PLAZA DRIVE, SUITE 200
City-St-Zip: HIGHLANDS RANCH, CO 80129

Title: TRE () Delete
Name: JOHNSON, DEAN C
Address: 630 PLAZA DRIVE, SUITE 200
City-St-Zip: HIGHLANDS RANCH, CO 80129

Title: SD () Delete
Name: NIPARKO, STEVEN J
Address: 630 PLAZA DRIVE, SUITE 200
City-St-Zip: HIGHLANDS RANCH, CO 80129

Title: D () Delete
Name: SCHNEIDER, FREIDRICH
Address: PO BOX 33, 6800 LE
City-St-Zip: ARNHEIM, NL 68000

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP () Change (X) Addition
Name: COURTNEY, JASON
Address: 1650 PRUDENTIAL DRIVE, SUITE 400
City-St-Zip: JACKSONVILLE, FL 32207

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: STEVEN J. NIPARKO

SD

09/25/2008

Electronic Signature of Signing Officer or Director

Date