

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

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

04-26-1999 90050 032 ***150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F98000003248
 1. Corporation Name
KIEWIT CONSTRUCTION COMPANY



Principal Place of Business 1000 KIEWIT PLAZA OMAHA NE 68131	Mailing Address 1000 KIEWIT PLAZA OMAHA NE 68131
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Accounting Operations 27 1000 Kiewit Plaza 28 Omaha, NE 29 68131-3374 30	3. Date Incorporated or Qualified 06/09/1998	4. FEI Number 47-0640263	Applied For <input type="checkbox"/> Yes <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
		8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No		

9. Name and Address of Current Registered Agent
**C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324**

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. (NOT Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME STINSON, KENNETH E	1.1 TITLE Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1000 KIEWIT PLAZA	CITY-ST-ZIP OMAHA NE 68131	1.2 NAME Rodney K. Rosenthal	
		1.3 STREET ADDRESS 1000 Kiewit Plaza	
		1.4 CITY-ST-ZIP Omaha, NE 68131-3374	
TITLE VD	NAME TOLL, GEORGE B JR.	2.1 TITLE Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1000 KIEWIT PLAZA	CITY-ST-ZIP OMAHA NE 68131	2.2 NAME Gregory D. Brokke	
		2.3 STREET ADDRESS 1000 Kiewit Plaza	
		2.4 CITY-ST-ZIP Omaha, NE 68131-3374	
TITLE V	NAME GEARY, RICHARD	3.1 TITLE Exec. Vice President/Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1000 KIEWIT PLAZA	CITY-ST-ZIP OMAHA NE 68131	3.2 NAME Richard W. Colf	
		3.3 STREET ADDRESS 1000 Kiewit Plaza	
		3.4 CITY-ST-ZIP Omaha, NE 68131-3374	
TITLE VD	NAME GREWCOCK, BRUCE E	4.1 TITLE Exec. Vice President/Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1000 KIEWIT PLAZA	CITY-ST-ZIP OMAHA NE 68131	4.2 NAME Allan K. Kirkwood	
		4.3 STREET ADDRESS 1000 Kiewit Plaza	
		4.4 CITY-ST-ZIP Omaha, NE 68131-3374	
TITLE V	NAME PATTERSON, DOUGLAS E	5.1 TITLE Senior Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1000 KIEWIT PLAZA	CITY-ST-ZIP OMAHA NE 68131	5.2 NAME Roy L. Cline	
		5.3 STREET ADDRESS 1000 Kiewit Plaza	
		5.4 CITY-ST-ZIP Omaha, NE 68131-3374	
TITLE D	NAME STORTZ, THOMAS C	6.1 TITLE Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS 1000 KIEWIT PLAZA	CITY-ST-ZIP OMAHA NE 68131	6.2 NAME Kirk R. Samuelson	
		6.3 STREET ADDRESS 1000 Kiewit Plaza	
		6.4 CITY-ST-ZIP Omaha, NE 68131-3374	

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: *Rodney K Rosenthal* Rodney K. Rosenthal 4/23/99 402-342-2052
 SECRETARY DATE DAYTIME PHONE #

CR2E034 (11/98)