## 2001 UNIFORM BUSINESS REPORT (UBR)

## Apr 20, 2001 8:00 am Secretary of State DOCUMENT # F98000005442 1. Entity Name FLUOR NUCLEAR SERVICES, INC. 20-2001 90188 024 \*\*\*150.00 Principal Place of Business Mailing Address ONE ENTERPRISE DR ONE ENTERPRISE DR F2R ALISO VIEJO CA 92656 ALISO VIEJO CA 92656 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 33-0690996 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 E. PARK AVENUE TALLAHASSEE FL 32301 Zip Code City FL 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE.IS \$150.00. 9. This corporation is eligible to satisfy its: Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PRESIDENT Change ☐ Addition Delete TITLE TITLE R.G. PETEYSON ONE ENTERPRISE DE. SMITH. H R NAME NAME 100 FLUOR DANIEL DRIVE STREET ADDRESS STREET ADDRESS VIEJO, Ca. 92656 CITY-ST-ZIP CITY-ST-ZIP **GREENVILLE SC 29607** ☐ Addition TITLE Change ☐ Delete TITLE HULL, S F NAME NAME ONE ENTERPRISE DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP ALISO VIEJO CA 92656 CITY-ST-ZIP ☐ Addition SD ☐ Change TITLE ☐ Delete TITLE FISHER, L N NAME NAME ONE ENTERPRISE DR STREET ADDRESS STREET ADDRESS ALISO VIEJO CA 92656 CITY-ST-ZIP CITY-ST-7IP **CFO** ☐ Addition ☐ Change TITLE ☐ Oelete TITLE HAKE, R F NAME NAME ONE ENTERPRISE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ALISO VIEJO CA 92656 AS TITLE □ Delete TITLE Change Addition REYNOLDS, J R NAME NAME 100 FLUOR DANIEL DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP **GREENVILLE SC 29607** CITY-ST-ZIP ASST. TREASURER Delete Change TITLE TITLE ☐ Addition MINI C. TSENC. ONE ENTERPRISE DR. F2B CREEL, J M NAME NAME ONE ENTERPRISE DR STREET ADDRESS STREET ADDRESS ALISO VIETO CA 92656 CITY-ST-ZIP

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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

ALISO VIEJO CA 92656

CITY-ST-ZIP