

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 19, 2001 8:00 am  
Secretary of State

04-19-2001 90296 027 \*\*\*150.00

DOCUMENT # F99000000177

1. Entity Name

BECHTEL BETTIS, INC.

Principal Place of Business

814 PITTSBURG-MCKEESPORT BLVD.  
WEST MIFFLIN PA 15122

Mailing Address

C/O TAX DEPARTMENT  
50 BEALE STREET  
SAN FRANCISCO CA 94105  
US

2. Principal Place of Business

50 BEALE STREET

3. Mailing Address

Suite, Apt. #, etc.

City & State

SAN FRANCISCO, CA

City & State

SAN FRANCISCO, CA

Zip

94105

Country

U. S. A.

Zip

94105

Country

U. S. A.

4. FEI Number 94-3257295

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	RUTH, B. H.	
STREET ADDRESS	P.O. BOX 193965	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	CD	<input type="checkbox"/> Delete
NAME	HASH, T.F.	
STREET ADDRESS	P.O. BOX 193965	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	NAVENTI, R.F.	
STREET ADDRESS	P.O. BOX 193965	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	TC	<input type="checkbox"/> Delete
NAME	DERSHEIMER, ANN	
STREET ADDRESS	P.O. BOX 193965	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	S	<input type="checkbox"/> Delete
NAME	OGDEN, S.P.	
STREET ADDRESS	P.O. BOX 193965	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	
TITLE	AS	<input type="checkbox"/> Delete
NAME	HUMPHRIES, J.R.	
STREET ADDRESS	P.O. BOX 193965	
CITY-ST-ZIP	SAN FRANCISCO CA 94105	

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROGERS, W.C.	
STREET ADDRESS	P.O. BOX 193965	
CITY-ST-ZIP	SAN FRANCISCO, CA 94119	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO, CA 94119	
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HADDAD, S.G.	
STREET ADDRESS	P.O. BOX 193965	
CITY-ST-ZIP	SAN FRANCISCO, CA 94119	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO, CA 94119	
TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO, CA 94119	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO, CA 94119	

13. 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 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.

SIGNATURE:

*A. Dersheimer*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

A. DERSHEIMER  
Controller & Treasurer  
(Authorized Officer)

4/3/01

Date

(414) 768-3531

Daytime Phone #

CR2E034 (10/00)

Document#  
F9900000077

BECHTEL BETTIS, INC.

BBINC

FEIN - 94-3257295

5327B

**Directors**

HASH, T.F.  
MITCHELL, J.T.  
SMITH, M.N.  
ROGERS, W.C.  
HADDAD, S.G.  
OGDEN, S.P.

Chairman and Director  
Director  
Director  
President & Director  
Vice President & Director  
Secretary & Director

**Officers**

HAUGHEY, S.B.  
DERSHEIMER, ANN  
HUMPHRIES, J.R.

Vice President, Asst. Treasurer and Asst. Controller  
Treasurer and Controller  
Assistant Secretary

Board of Directors  
Authorized: 10  
Quorum: 4

Communications to any of the above Directors and Officers may be addressed in c/o  
T.A. Carlson at 50 Beale Street, San Francisco, CA 94105