## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## May 03, 2005 8:00 am Secretary of State **DOCUMENT # F99000005413** 05-03-2005 90171 023 \*\*\*158.75 JACOBS CONSTRUCTION SERVICES INC. Principal Place of Business Mailing Address 20055677 501 N. BROADWAY P.O. BOX 7084 SAINT LOUIS, MO 63102 PASADENA, CA 91109-7084 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt, #, etc. 04052005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 43-1865020 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 Zip Code FΙ 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE X Change ☐ Addition NAME SADOFF, LAURANCE R NAME Sadoff, Laurance R. STREET ADDRESS 5995 ROGERDALE RD STREET ADDRESS CITY-ST-7IP HOUSTON, TX 77072 CITY-ST-ZIP TITLE ☐ Delete TITLE Addition ☐ Channe NAME SCOTT, JAMES J Cram, Scott W. NAME STREET ADDRESS 501 N. BROADWAY STREET ADDRESS 501 N. Broadway CITY-ST-7/P SAINT LOUIS, MO 63102 CITY-ST-ZIP <u>St. Louis MO 63102</u> TITLE ☐ Delete TITLE ☐ Channe **X** Addition GOLDFARB, JEFF M NAME NAME Landry, Greg J. STREET ADDRESS 501 N. BROADWAY STREET ADDRESS 400S 8500 Macleod Trail CITY-ST-ZIP SAINT LOUIS, MO 63102 CITY-ST-ZIP Calgary, Canada T2H 2N7 TITLE ☐ Delete TITLE ☐ Change ☐ Addition MARKLEY, WILLIAM C III NAME STREET ADDRESS 1111 SOUTH ARROYO PARKWAY STREET ADDRESS CITY-ST-ZIP PASADENA, CA 91105 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition PROSSER, JOHN W NAME NAME STREET ADDRESS 1111 SOUTH ARROYO PARKWAY STREET ADDRESS CITY-ST-ZIP PASADENA, CA 91105 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME HAMMOND, THOMAS R STREET ADDRESS 1111 S. ARROYO PARKWAY STREET ADDRESS CITY-ST-ZIP PASADENA, CA 91105 City-St-7/P

12. I hereby certify that the information supplied with this filling 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 10 or Block 11 if changed, or on an attachment with an address, with all other the empowered.

ING OFFICER OF DIRECTOR

John W. Pro<u>sser, Jr</u>

04/25/2005

(626) 578 3500

**FILED**