2000 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 20, 2000 8:00 am Secretary of State **DOCUMENT # J75791** REGIONAL ENGINEERS, PLANNERS & SURVEYORS, INC. 03-20-2000 90047 049 ***150.00 Mailing Address Principal Place of Business 7655 REDWOOD BLVD. 7655 REDWOOD BLVD. NOVATO GA 94945-1408 NOVATO GA 94945 US 3. Mailing Address 2. Principal Place of Business 707 Seventeenth St. 707 Seventeenth St., DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Suite 2400 Suite 2400 4. FEI Number Applied For City & State City & State 59-2814347 Not Applicable Denver, CO Denver, CO Country \$8.75 Additional Ziρ Country 5. Certificate of Status Desired Fee Required 80202 80202 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 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, 2000 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. P/D ☐ Addition TITLE **PTC** Delete TITLE NAME NAME THORNTON, GREGORY A Robert L. Costello STREET ADDRESS STREET ADDRESS 7655 REDWOOD BLVD 707 Seventeenth St., Suite 2400 CITY-ST-ZIP CITY-ST-ZIP **NOVATO CA 94945** Denver, CO 80202 ☐ Addition X Delete TITLE TITLE V/S/T NAME ENGLAND, PATRICIA A NAME Valorie B. Feher STREET ADDRESS STREET ADDRESS 7655 REDWOOD BLVD 707 Seventeenth St., Suite 2400 CITY-ST-ZIP CITY-ST-ZIP **NOVATO CA 94945** Denver, CO 80202 ☐ Addition TITLE Change ☐ Delete TITLE V/D NAME CORVINO, CLAUDE NAME STREET ADDRESS STREET ADDRESS. 90 DIGITAL DR. CITY-ST-ZIP CITY-ST-ZIP NOVATO CA 94949 ☐ Change X Addition ☐ Delete V/D TITLE NAME NAME Ann E. Massey STREET ADDRESS STREET ADDRESS 1400 Center Point Blvd., Suite 158 CITY-ST-ZIP CITY-ST-7IP Knoxville, TN 37932-1960 ☐ Change X Addition ☐ Delete TITLE TITLE NAME NAME Terry L. Legvold STREET ADDRESS STREET ADDRESS 6500 All American Blvd. CITY-ST-ZIP CITY-ST-ZIP Orlando, FL 32810 ☐ Change Addition ☐ Delete

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Valorie B. Feher

303-293-6100