2001 UNIFORM BUSINESS REPORT (UBR	2001	UNIFO	RM BUS	INESS R	REPORT	(UBR
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2001 UNIFORM BUSINESS REPORT (UBR)					?)		APPROVI	ED			9
DOCUMENT # J75791 1. Entity Name							和监	**************************************			9
REGIONAL ENGINEERS, PLANNERS & SURVEYORS, INC.							01 OCT -5 AM	8:51			2
Principal Place of Business 707 SEVENTEENTH ST STE 2400 DENVER CO 80202 US Mailing Address 707 SEVENTEENTH ST STE 2400 DENVER CO 80202 US							SECRETARY OF STALLAHASSEE, FLO			ICIT AYAXI ILAI	
2. Principal Place of Business 1627 Cole Blvd. Suite, Apt. #, etc. 3. Mailing Address 1627 Cole Blvd. Suite, Apt. #, etc.			١.			٤	DO NOT WRITE		•••••	(i)	
City & Stat Golden Zip		City & State Golden, CO Zip	Count	trv			Number 59-2814347	_	_ 	oplied For of Applicable]
80401	US	80401	ÜS	-,		5. Ce	rtificate of Status Desired		ee Require		
	6. Name and Address of Current F	legistered Agent		Name		7. Naı	me and Address of New Reg	gistered Ag	ent		+
1200 S. P	ORATION SYSTEM INE ISLAND ROAD	: • • • • •			ldress (P.	O. Box	Number is Not Acceptable)				
PLANTATIO	ON FL 33324			City				FL	Zip Code	e	-
8. The above	named entity submits this statement for	the purpose of changing its re	egistere	ed office or	registered	d agen	t, or both, in the State of Florid	da.			1
SIGNATURE	Signature, typed or printed name of registered agent a	od titla if applicable (NOTE:	Pogiatoros	d Agent signatu	co conviced w	han raina	tating)	DATE			
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so. ria on back)	FILE NOW!!! After September 12, Make Check Payable	FEE 2001 I	IS \$550.0 Fee will be	0 \$750.00	0	Election Campaign Finar Trust Fund Contribution.			00 May Be	
11.	OFFICERS AND D		12.		D	ADDI	TIONS/CHANGES TO OFFIC				<u>ا</u> ج
TITLE . NAME STREET ADDRESS CITY-ST-ZIP	PD COSTELLO, ROBERT L 707 -17TH ST STE 2400 DENVER CO 80202	⊠ Delete		I	Scot 1627	7 Co	. State le Blvd. CO 80401		Change	X Addition	R2E034 (E/01
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CORVINO, CLAUDE 90 DIGITAL DR. NOVATO CA 94949	☐ Delete			SVP	1611	90000464 -10/18/01 	#17 !010!	5500		-
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MASSEY, ANN E 1400 CTR POINT BLVD- STE 158 KNOXVILLE TN 37932-1960	⊠ Delete				,]	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LEGVOLD, TERRY L 6500 ALL AMERICAN BLVD ORLANDO FL 32810	□ Delete		1]	Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Oelete							Change	Addition	
13. I hereby of indicated	certify that the information supplied with on this report or supplemental report is	his filing does not qualify for t rue and accurate and that my	he exer	mption state	ed in Sect ive the sa	ion 119	9.07(3)(i), Florida Statutes. I fu al effect as if made under oat	urther certify th; that I am	that the in	nformation or director]

SIGNATURE:

of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 60 changed, or on an attachment with an address, with all other like empowered.

GNATURE:

SIGNATURE AND TYPES OR PRINTED AMES SIGNING OFFICER OR DIRECTOR

303-273 - 5084 Daytime Phone #