

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 21, 1999 8:00 am
Secretary of State

04-21-1999 90205 041 ***150.00

DOCUMENT # M26627

1. Corporation Name
OGDEN CONSTRUCTORS, INC.

Principal Place of Business

3211 JERMANTOWN RD.
FAIRFAX VA 22030
US

Mailing Address

5510 MOREHOUSE DRIVE
ATTN: S. MALUBAY
SAN DIEGO CA 92121

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1986

4. FEI Number

59-2661991

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 4455 BROOKFIELD CORPORATE
DRIVE

Suite, Apt. #, etc.

22 SUITE 100

City & State

23 CHANTILLY VA 20151

Zip Country

24 25 29 30

2a. Mailing Address C/O OGDEN CORP.

26 2 PENN PLAZA

Suite, Apt. #, etc.

27 26FLOOR, TAX DEPT.

City & State

28 NEW YORK NY 10121-0032

Zip Country

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM
1201 HAYES STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

T
NAME O'BRIEN, DENNIS P
STREET ADDRESS 3211 JERMANTOWN ROAD, SUITE 300
CITY-ST-ZIP FAIRFAX VA 22032

P
NAME SANGER, HENRY L
STREET ADDRESS 3211 JERMANTOWN ROAD
CITY-ST-ZIP FAIRFAX VA

SD
NAME PROVINCE, SHARON G.
STREET ADDRESS 5510 MOREHOUSE DRIVE
CITY-ST-ZIP SAN DIEGO CA

SVP
NAME PUGH, THOMAS A
STREET ADDRESS 3211 JERMANTOWN ROAD, SUITE 300
CITY-ST-ZIP FAIRFAX VA 22030

V
NAME ALLEN, PETER
STREET ADDRESS TWO PENNSYLVANIA PLAZA
CITY-ST-ZIP NEW YORK NY

VP
NAME WANCE, DENNIS M
STREET ADDRESS 3211 JERMANTOWN ROAD, SUITE 300
CITY-ST-ZIP FAIRFAX VA 22030

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE TD ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 4455 BROOKFIELD CORPORATE DRIVE, SUITE 100
1.4 CITY-ST-ZIP CHANTILLY VA 20151

2.1 TITLE PD ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 4455 BROOKFIELD CORPORATE DRIVE, SUITE 100
2.4 CITY-ST-ZIP CHANTILLY VA 20151

3.1 TITLE VD ☐ Change ☒ Addition
3.2 NAME JEFFREY R. HOROWITZ
3.3 STREET ADDRESS 40 LANE ROAD
3.4 CITY-ST-ZIP FAIRFIELD NJ 07007-2615

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS 4455 BROOKFIELD CORPORATE DRIVE, SUITE 100
4.4 CITY-ST-ZIP CHANTILLY VA 20151

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS 4455 BROOKFIELD CORPORATE DRIVE, SUITE 100
6.4 CITY-ST-ZIP CHANTILLY VA 20151

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

JEFFREY R. HOROWITZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4 / 5 / 99 (212) 868-6133

Date

Daytime Phone #

CR2E034 (11/98)

0551812