

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13217

FILED
Jan 28, 2009
Secretary of State

Entity Name: JACOBS ENGINEERING GROUP INC.

Current Principal Place of Business:

1111 S ARROYO PARKWAY
PASADENA, CA 91105 US

New Principal Place of Business:

Current Mailing Address:

ATTN: TAX DEPT.
P.O. BOX 7084
PASADENA, CA 911097084 US

New Mailing Address:

FEI Number: 95-4081636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CEOP () Delete
Name: MARTIN, CRAIG L
Address: 1111 S ARROYO PARKWAY
City-St-Zip: PASADENA, CA 91105

Title: VP () Delete
Name: MARKLEY, III, WILLIAM C
Address: 1111 S ARROYO PARKWAY
City-St-Zip: PASADENA, CA 91105

Title: T () Delete
Name: PROSSER, JR, JOHN W
Address: 1111 S ARROYO PARKWAY
City-St-Zip: PASADENA, CA 91105

Title: S () Delete
Name: MARKLEY, III, WILLIAM C
Address: 1111 S ARROYO PARKWAY
City-St-Zip: PASADENA, CA 91105

Title: COB () Delete
Name: WATSON, NOEL G
Address: 1111 S ARROYO PARKWAY
City-St-Zip: PASADENA, CA 91105

Title: D () Delete
Name: MARTIN, CRAIG L
Address: 1111 S. ARROYO PARKWAY
City-St-Zip: PASADENA, CA 91105

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: MCMAHON, KEVIN J
Address: 299 MADISON AVE
City-St-Zip: MORRISTOWN, NJ 07962

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: UDOVIC, MICHAEL S
Address: 1111 S ARROYO PARKWAY
City-St-Zip: PASADENA, CA 91105

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN W. PROSSER, JR.

TREA

01/28/2009

Electronic Signature of Signing Officer or Director

_____ Date