

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P15538

FILED
Jul 17, 2008
Secretary of State

Entity Name: TRIGON / KLEINFELDER, INC.

Current Principal Place of Business:

5015 SHOREHAM PLACE
SAN DIEGO, CA 92122

New Principal Place of Business:

Current Mailing Address:

5015 SHOREHAM PLACE
SAN DIEGO, CA 92122

New Mailing Address:

FEI Number: 56-1370993

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SALONTAI, GERALD J
Address: 5015 SHOREHAM PLACE
City-St-Zip: SAN DIEGO, CA 92122

Title: SD () Delete
Name: CAREY, RUSSELL O
Address: 5015 SHOREHAM PLACE
City-St-Zip: SAN DIEGO, CA 92122

Title: D () Delete
Name: PATTON, BARTLETT W
Address: 8 PASTEUR, STE 190
City-St-Zip: SAN DIEGO, CA 92122

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SALONTAI, GERALD J
Address: 5015 SHOREHAM PLACE
City-St-Zip: SAN DIEGO, CA 92122

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

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

Title: VP D () Change (X) Addition
Name: WELLS, RICHARD C
Address: 313 GALLIMORE DAIRY ROAD
City-St-Zip: GREENSBORO, NC 24709

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: RUSSELL O. CAREY

SECY

07/17/2008

Electronic Signature of Signing Officer or Director

Date