## **2001 UNIFORM BUSINESS REPORT (UBR)**

## May 03, 2001 8:00 am Secretary of State **DOCUMENT # P19510** CHICAGO BRIDGE & IRON COMPANY (DELAWARE) 05-03-2001 91151 002 \*\*\*150.00 Principal Place of Business Mailing Address 1501 N DIVISION 1501 N DIVISION PLAINFIELD IL 60544 PLAINFIELD IL 60544 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEi Number 36-3026565 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 City Zip Code 701 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TIT! F ☐ Change ☐ Addition GLENN, GERALD M NAME NAME STREET ADDRESS 413 W WALNUT STREET ADDRESS CITY-ST-ZIP HINSDALE FL CITY-ST-ZIP **VPCE** TITLE ☐ Delete TITLE ☐ Addition ☐ Change WIGGINS, TIMOTHY J NAME NAME STREET ADDRESS 2505 HANFORD LANE STREET ADDRESS CITY-ST-ZIP **AURORA IL** CITY-ST-ZIP 📆 Delete TITLE TITLE ☐ Change ☐ Addition RUSSELL, R S NAME NAME STREET ADDRESS 211 RYAN CT STREET ADDRESS CITY-ST-ZIP ARLINGOTN HEIGHTS IL CITY-ST-ZIP **VPD** TITLE Delete TITLE Change Addition HAGSTROM, JON NAME NAME STREET ADDRESS 317 HUNDSON AVE STREET ADDRESS CITY-ST-ZIP CLARENDON HILL IL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition SCHLEIFE, JAMES M NAME NAME STREET ADDRESS 307 LANDSHIRE CT STREET ADDRESS CITY-ST-ZIP OSWEGO IL CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME BROWN, M. JEAN NAME Timothy J.P. Moran

Plainfield, Il 60544 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 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.

STREET ADDRESS

CITY-ST-ZIP

**SIGNATURE:** 

337 SCOTT AVE

GLEN ELLYN IL 60137

STREET ADDRESS

CITY-ST-ZIP

IGNING OFFICER OR DIRECTOR

1501 North Division St.