## 2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001646

Entity Name: LAYNE INLINER, LLC

**Current Principal Place of Business:** 

1800 HUGHES LANDING BOULEVARD

SUITE 800

THE WOODLANDS, TX 77380

**Current Mailing Address:** 

1800 HUGHES LANDING BOULEVARD SUITE 800

THE WOODLANDS, TX 77380 US

FEI Number: 01-0684682 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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:

Address

Address

Electronic Signature of Registered Agent Date

City-State-Zip:

City-State-Zip:

SANFORD FL 32771

THE WOODLANDS TX 77380

Authorized Person(s) Detail:

Title MMGR Title VP

Name LAYNE HEAVY CIVIL, INC. Name HARRIS, MARK M
Address 1800 HUGHES LANDING BOULEVARD Address 2531 JEWETT LANE

SUITE 800

City-State-Zip: THE WOODLANDS TX 77380

Title VP, CFO, MANAGER

Name CROOKE, STEVEN F

Name ANDERSON, J MICHAEL Address 1800 HUGHES LANDING BOULEVARD

1800 HUGHES LANDING BOULEVARD SUITE 800

SUITE 800

City-State-Zip: THE WOODLANDS TX 77380

Title PRESIDENT Title ASST. TREASURER
Name SCHMIDT, CURTIS J

Name PURLEE, LARRY D Address 1800 HUGHES LANDING BOULEVARD

4520 NORTH STATE ROAD 37 SUITE 800

City-State-Zip: ORLEANS IN 47452 City-State-Zip: THE WOODLANDS TX 77380

Title VP, TREASURER Title MANAGER

Name VERVILLE, KEITH D Name CALIEL, MICHAEL J

Address 1800 HUGHES LANDING BOULEVARD Address 1800 HUGHES LANDING BOULEVARD

SUITE 800 SUITE 800

City-State-Zip: THE WOODLANDS TX 77380 City-State-Zip: THE WOODLANDS TX 77380

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I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CURTIS J SCHMIDT ASSISTANT TREASURER

Electronic Signature of Signing Authorized Person(s) Detail

04/26/2016 Date

FILED Apr 26, 2016

Secretary of State

CC6397671130

## **Authorized Person(s) Detail Continued:**

Title VP

Name MCCLANAHAN, DENISE C
Address 4520 NORTH STATE ROAD 37

City-State-Zip: ORLEANS IN 47452