

2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000000460

Entity Name: JACOBS EAGLETON LLC**Current Principal Place of Business:**2900 NORTH LOOP WEST
HOUSTON, TX 77092-8841**Current Mailing Address:**SHOVAN BAKSI, JACOBS HOUSE
RAMKRISHNA MANDIR ROAD, ANDHERI EAST
SHOVAN.BAKSI@JACOBS.COM
MUMBAI, 400059 MAHARASHTRA IN**FEI Number:** 76-0088795**Certificate of Status Desired:** Yes**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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	TREASURER
Name	CARLIN, MICHAEL
Address	155 NORTH LAKE AVENUE
City-State-Zip:	PASADENA CA 91101

Title	VP
Name	ALLEN, WILLIAM "BILLY" B
Address	1999 BRYAN STREET
City-State-Zip:	DALLAS TX 75201

Title	VP
Name	BUNDERSON, MICHAEL
Address	155 NORTH LAKE AVENUE
City-State-Zip:	PASADENA CA 91101

Title	VP
Name	CAUSSADE, GILLES
Address	5995 ROGERDALE ROAD
City-State-Zip:	HOUSTON TX 77072

Title	SECRETARY
Name	TYLER, MICHAEL R
Address	600 WILSHIRE BLVD SUITE 1000
City-State-Zip:	LOS ANGELES CA 90017

Title	VP
Name	SHEBARO, BASSIM
Address	6TH FLOOR, 101 EASTERN RING ROAD
City-State-Zip:	ABU DHABI

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: MICHAEL CARLIN**TREASURER****04/28/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date