

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 848780

Entity Name: URS CORPORATION SOUTHERN**Current Principal Place of Business:**1999 AVENUE OF THE STARS
SUITE 2600
LOS ANGELES, CA 90067**Current Mailing Address:**9400 AMBERGLEN BLVD.
C/O KRISTIN JONES
AUSTIN, TX 78729 US**FEI Number:** 59-2087895**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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title V
Name CARCIA, CARLOS
Address 7650 CORPORATE CENTER DRIVE,
STE 400
City-State-Zip: MIAMI FL 33126

Title V
Name HENRIQUEZ, STEVEN
Address 7650 W. COURTNEY CAMPBELL
CAUSEWAY
City-State-Zip: TAMPA FL 33607-1462

Title V
Name NOPPINGER, STEPHEN
Address 315 EAST ROBINSON ST., SUITE 245
City-State-Zip: ORLANDO FL 32801-1975

Title S
Name JONES, KRISTIN L
Address 9400 AMBERGLEN BLVD.
City-State-Zip: AUSTIN TX 78729

Title V
Name MAYO, JAMES
Address 1625 SUMMIT LAKE DR., SUITE 200
City-State-Zip: TALLAHASSEE FL 32317

Title D
Name KEENER, TIMOTHY
Address 1600 PERIMETER PARK DRIVE
SUITE 400
City-State-Zip: MORRISVILLE NC 27560

Title DEVPC
Name BOECHLER, PAUL M
Address 600 MONTGOMERY ST.
25TH FLR.
City-State-Zip: SAN FRANCISCO CA 94111

Title V
Name BAEZ, TEOFILO
Address 5100 NW 33RD AVE
SUITE 155
City-State-Zip: FT. LAUDERDALE FL 33309

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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 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 all other like empowered.

SIGNATURE: KRISTIN L. JONES**SECRETARY****01/02/2015**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name BOUCLE, JULIO
Address 7650 CORPORATE CENTER DR.
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City-State-Zip: MIAMI FL 33126

Title VP
Name CURSEY, ROBERT E
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City-State-Zip: TAMPA FL 33607

Title VP
Name EVANS, CHARLES H
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Title VP
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Title VP
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Title VP
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Title VP
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Title VP
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