

2014 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F04000000108

Entity Name: CH2M HILL ENGINEERS, INC.**Current Principal Place of Business:**9127 S. JAMAICA STREET
ENGLEWOOD, CO 80112**Current Mailing Address:**9191 S. JAMAICA ST.
ATTN: TAX
ENGLEWOOD, CO 80112**FEI Number:** 32-0100027**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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	P/D
Name	SZOMJASSY, MICHAEL A
Address	1000 ABERNATHY RD., #1600
City-State-Zip:	ATLANTA GA 30328

Title	DIRECTOR, SVP
Name	BERRA, ROB
Address	14701 ST. MARY'S LN., #300
City-State-Zip:	HOUSTON TX 77079

Title	SVP
Name	BAILEY, ROBERT W
Address	225 E. ROBINSON ST., #505
City-State-Zip:	ORLANDO FL 32801

Title	SEC
Name	HILTY, SARAH K
Address	9191 S JAMAICA ST
City-State-Zip:	ENGLEWOOD CO 80112

Title	VP/TRES
Name	MATHEWS, STEVEN
Address	9191 S. JAMAICA ST.
City-State-Zip:	ENGLEWOOD CO 80112

Title	VP
Name	BAUER-MARTINEZ, JOHN
Address	9191 S. JAMAICA ST.
City-State-Zip:	ENGLEWOOD CO 80112

Title	DIRECTOR
Name	MCINTYRE, GREGORY T
Address	9191 S. JAMAICA ST.
City-State-Zip:	ENGLEWOOD CO 80112

Title	VICE PRESIDENT
Name	POWELL, WILLIAM M
Address	10123 ALLIANCE RD., #300
City-State-Zip:	CINCINNATI OH 45242

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: JOHN BAUER-MARTINEZ**VICE PRESIDENT****10/22/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date