

**2017 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F04000000114

**FILED  
Jul 17, 2017  
Secretary of State  
CC0508209013**

**Entity Name:** TERRACON CONSULTANTS, INC.

**Current Principal Place of Business:**

18001 W. 106 TH ST.  
300  
OLATHE, KS 66061

**Current Mailing Address:**

18001 W. 106 TH ST.  
300  
OLATHE, KS 66061

**FEI Number:** 42-1249917

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 CEO/CHAIR  
Name GABOURY, DAVID R  
Address 18001 W. 106TH ST STE. 300  
City-State-Zip: OLATHE KS 66061

Title TREASURER  
Name VRANA, DONALD J  
Address 18001 W. 106TH ST STE. 300  
City-State-Zip: OLATHE KS 66061

Title DIR  
Name COVERT, MICHAEL E  
Address 18001 W. 106 TH ST.  
300  
City-State-Zip: OLATHE KS 66061

Title DIR  
Name COBB, C. HAROLD  
Address 11555 CLAY ROAD, SUITE 100  
City-State-Zip: HOUSTON TX 77043

Title DIRECTOR  
Name PAVLICEK, ROBERT W.  
Address 2401 BRENTWOOD ROAD, STE 107  
City-State-Zip: RALEIGH NC 27604

Title SECRETARY  
Name YOST, MICHAEL J  
Address 18001 W. 106 TH ST.  
300  
City-State-Zip: OLATHE KS 66061

Title PRESIDENT  
Name SRINIVASAN, SWAMINATHAN  
Address 18001 W. 106 TH ST.  
300  
City-State-Zip: OLATHE KS 66061

Title DIRECTOR  
Name ANDERSON, TIMOTHY W  
Address 4685 S. ASH AVE  
#H4  
City-State-Zip: TEMPE AZ 85282

**Continues on page 2**

*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:** MICHAEL J YOST

**SECRETARY**

**07/17/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASST. SECRETARY  
Name COURTNEY, PATRICK L  
Address 18001 W 106TH STREET  
SUITE 300  
City-State-Zip: OLATHE KS

Title ASST. TREASURER  
Name PARIS, BRYAN M  
Address 18001 W 106TH STREET  
SUITE 300  
City-State-Zip: OLATHE KS 66061