

**2014 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F06000007147

**Entity Name:** BECHTEL COMMUNICATIONS, INC.**Current Principal Place of Business:**5275 WESTVIEW DRIVE  
FREDERICK, MD 21703-8306**Current Mailing Address:**C/O TAX DEPT.  
50 BEALE STREET  
SAN FRANCISCO, CA 94105**FEI Number:** 20-5784228**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 AS  
Name SCHAFER, KIMBERLEY C  
Address 50 BEALE STREET  
City-State-Zip: SAN FRANCISCO CA 94105

Title P  
Name GRIMM, DONN W  
Address 5275 WESTVIEW DRIVE  
City-State-Zip: FREDERICK MD 21703-8306

Title T  
Name LEADER, KEVIN C  
Address 50 BEALE STREET  
City-State-Zip: SAN FRANCISCO CA 94105

Title S, VP  
Name QUAZZO, MARY W  
Address 50 BEALE STREET  
City-State-Zip: SAN FRANCISCO CA 94105

Title AC  
Name RESTIVO, PEGGY H  
Address 50 BEALE STREET  
City-State-Zip: SAN FRANCISCO CA 94105

Title VP, DIRECTOR  
Name ADAMS, MICHAEL A  
Address 12011 SUNSET HILLS ROAD, SUITE 110  
City-State-Zip: RESTON VA 20190

Title ASST. SECRETARY  
Name WESTON, BRUCE S  
Address 5275 WESTVIEW DRIVE  
City-State-Zip: FREDERICK MD 21703-8306

*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:** PEGGY H. RESTIVO**ASST. CONTROLLER****04/24/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date