

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000004371

**Entity Name:** LOUIS BERGER SERVICES, INC.**Current Principal Place of Business:**125 THE PARKWAY, SUITE 250  
GREENVILLE, SC 29615**Current Mailing Address:**125 THE PARKWAY, SUITE 250  
GREENVILLE, SC 29615**FEI Number:** 26-3820667**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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            PRESIDENT  
Name            BAILEY II, ANDREW V  
Address        1250 23RD ST, NW  
City-State-Zip: WASHINGTON DC 20037

Title            TREASURER  
Name            LASSARAT, MEG  
Address        412 MOUNT KEMBLE AVENUE  
City-State-Zip: MORRISTOWN NJ 07960

Title            ASST. TREASURER, CONTROLLER  
Name            KREISMAN, MICHAEL  
Address        125 THE PARKWAY  
                 SUITE 250  
City-State-Zip: GREENVILLE SC 29615

Title            DIRECTOR  
Name            BACH, JAMES G  
Address        412 MOUNT KEMBLE AVENUE  
City-State-Zip: MORRISTOWN NJ 07960

Title            SECRETARY  
Name            REAP, MICHAEL H  
Address        412 MOUNT KEMBLE AVENUE  
City-State-Zip: MORRISTOWN NJ 07960

Title            ASST. SECRETARY  
Name            SADOWSKI, MARK  
Address        412 MOUNT KEMBLE AVENUE  
City-State-Zip: MORRISTOWN NJ 07960

Title            DIRECTOR  
Name            MASUCCI, NICHOLAS  
Address        412 MOUNT KEMBLE AVENUE  
City-State-Zip: MORRISTOWN NJ 07960

*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:** MEG LASSARAT**TREASURER****04/28/2016**

Electronic Signature of Signing Officer/Director Detail

Date