

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005147

Entity Name: CH2M HILL INTERNATIONAL SERVICES, INC.

Current Principal Place of Business:

9191 SOUTH JAMAICA STREET
ENGLEWOOD, CO 80112

Current Mailing Address:

9191 S. JAMAICA ST.
ATTN: TAX
ENGLEWOOD, CO 80112

FEI Number: 93-0750969

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O 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 PRESIDENT
Name RIGATTI, MARK J
Address 200 VERDAE BLVD.
City-State-Zip: GREENVILLE SC 29607

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

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

Title VP
Name LYON, DAVINIA J
Address 9191 S JAMAICA ST
City-State-Zip: ENGLEWOOD CO 80112

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

Title ASST. SECRETARY
Name RIMAS, CHERYL JETT
Address 9191 S. JAMAICA ST.
City-State-Zip: ENGLEWOOD CO 80112

Title DIRECTOR
Name SUTTON, MATHEW
Address 9191 S. JAMAICA ST.
City-State-Zip: ENGLEWOOD CO 80112

Title VICE PRESIDENT
Name SYBERT, JAMIE
Address 9191 S. JAMAICA ST.
City-State-Zip: ENGLEWOOD CO 80112

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: DAVINIA J. LYON

VICE PRESIDENT

04/10/2017

Electronic Signature of Signing Officer/Director Detail

Date