

**2020 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, DIRECTOR, CHAIRMAN  
Name            BYERS, TIMOTHY  
Address        2411 DULLES CORNER PARK  
City-State-Zip: HERNDON VA 20171

Title            SECRETARY  
Name            EARSOM, DERYL  
Address        9191 S. JAMAICA ST.  
City-State-Zip: ENGLEWOOD CO 80112

Title            SR. VP  
Name            GILMARTIN, KENNETH  
Address        2 ASH ST., #3000  
City-State-Zip: CONSHOHOCKEN PA 91101

Title            TAX DIRECTOR  
Name            WINTERS, KEVEN R  
Address        9191 S JAMAICA ST  
City-State-Zip: ENGLEWOOD CO 80112

Title            TREASURER  
Name            CARLIN, MICHAEL  
Address        1999 BRYAN ST.  
City-State-Zip: DALLAS TX 75201

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

Title            DIRECTOR, VP  
Name            KIRCHNER, MICHAEL  
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:** KEVEN R. WINTERS

**TAX DIRECTOR**

**04/07/2020**

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

\_\_\_\_\_  
Date