2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 857975** Apr 21, 2000 8:00 am Secretary of State CAMPBELL & ASSOCIATES CONSULTING ENGINEERS, INC. 04-21-2000 90027 023 ***150.00 Principal Place of Business Mailing Address 4131 N. CENTRAL EXPRESSWAY 4131 N. CENTRAL EXPRESSWAY SUITE 900 SUITE 900 DALLAS TX 75204-2120 DALLAS TX 75204 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 75-1669287 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. X Addition **PSD** ☐ Delete TITLE Executive Vice President TITLE NAME CAMPBELL, STEPHEN J. NAME Allan J. Baysek STREET ADDRESS STREET ADDRESS 4357 LIVINGSTON 40 Shuman Blvd., Suite 160 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75205 Naperville, Illinois 60563 X Addition ☐ Change ☐ Delete TITLE Vice President TITLE NAME NAME Randall J. Pliler STREET ADDRESS STREET ADDRESS 4131 North Central Expressway, Suite 900 CITY-ST-ZIP CITY-ST-ZIP <u>Dallas, Texas</u> Change ⁻ ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIF

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 exportered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an artificial other like empowered.

Stephen J. Campbell 1. 1. 214–559–2600

Stephen J. Campbell SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

CR2E034 (9/99