

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90046 009 ***158.75

DOCUMENT # F98000005093

1. Entity Name

PTG CONSTRUCTION SERVICES COMPANY

Principal Place of Business

Mailing Address

1133 15TH STREET, N.W.
 WASHINGTON DC 20005-2701

1133 15TH STREET, N.W.
 WASHINGTON DC 20005-2710

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number **36-4256887**

Applied For
 Not Applied

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back).

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (IN 11)

TITLE	PD	<input type="checkbox"/> Delete
NAME	O'NEIL, ROBERT	
STREET ADDRESS	1133 15TH STREET, N.W., SUITE 800	
CITY-ST-ZIP	WASHINGTON DC 20005-2701	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	DRAWDY, THOMAS	
STREET ADDRESS	2100 CENTERVILLE ROAD, SUITE C	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	DV	<input type="checkbox"/> Delete
NAME	GEORGE, WILLIAM	
STREET ADDRESS	525 W. MONROE STREET	
CITY-ST-ZIP	CHICAGO IL 60661	
TITLE	V	<input type="checkbox"/> Delete
NAME	STONE, GARY	
STREET ADDRESS	100 WEST WALNUT STREET	
CITY-ST-ZIP	PASADENA CA 91124	
TITLE	V	<input type="checkbox"/> Delete
NAME	COLE, SUSAN	
STREET ADDRESS	100 WEST WALNUT STREET	
CITY-ST-ZIP	PASADENA CA 91124	
TITLE	V	<input type="checkbox"/> Delete
NAME	LYZNAK, DENNIS	
STREET ADDRESS	8100 OAK LANE, #301	
CITY-ST-ZIP	MIAMI LAKES FL 33016	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Delete
NAME	Robert R. VanSickle	
STREET ADDRESS	4417 Beach Boulevard, Suite 400	
CITY-ST-ZIP	Jacksonville, Florida 32207	
TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Delete
NAME	William H. George	
STREET ADDRESS	1133 15th Street, N.W.	
CITY-ST-ZIP	Washington, D.C. 20005-2701	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William H. George*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/14/00 (202) 775-3333
 Date Daytime Phone #