

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# G79652

**Entity Name:** E.C. DRIVER & ASSOCIATES, INC.

**Current Principal Place of Business:**

300 CALIFORNIA STREET, 4TH FLOOR  
SAN FRANCISCO, CA 94104

**Current Mailing Address:**

300 CALIFORNIA STREET, 4TH FLOOR  
SAN FRANCISCO, CA 94104 US

**FEI Number:** 59-2375705

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

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 ASSISTANT SECRETARY  
Name SZURGOT, CHARLES FLORIAN  
Address 300 CALIFORNIA STREET, 4TH FLOOR  
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR  
Name RUDD, WILLIAM TROY  
Address 1999 AVENUE OF THE STARS, SUITE 2600  
City-State-Zip: LOS ANGEES CA 27560

Title DIRECTOR  
Name KEENER, TIMOTHY H.  
Address 1600 PERIMETER PARK DRIVE  
City-State-Zip: MORRISVILLE NC 27560

Title EXECUTIVE VICE PRESIDENT  
Name RUDD, WILLIAM TROY  
Address 1999 AVENUE OF THE STARS, SUITE 2600  
City-State-Zip: LOS ANGEES CA 90067

Title CONTROLLER  
Name RUDD, WILLIAM TROY  
Address 1999 AVENUE OF THE STARS, SUITE 2600  
City-State-Zip: LOS ANGEES CA 90067

Title TREASURER  
Name DRISCOLL, KEENAN EDWARD  
Address 1999 AVENUE OF THE STARS, SUITE 2600  
City-State-Zip: LOS ANGELES CA 90067

Title AUTHORIZED REPRESENTATIVE  
Name STAMER, ROBERT J.  
Address 300 CALIFORNIA STREET, 4TH FLOOR  
City-State-Zip: SAN FRANCISCO CA 94104

Title DIRECTOR  
Name JUST, MICHAEL R.  
Address 100 SOUTH WACKER DRIVE, SUITE 500  
City-State-Zip: CHICAGO IL 60606

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*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:** KEENAN EDWARD DRISCOLL

**TREASURER**

04/12/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name HOPSON, PRESTON  
Address C/O AECOM, 555 S. FLOWER STREET  
SUITE 3700  
City-State-Zip: LOS ANGELES CA 90071