

SCC eFile

2015 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

215509557

1.) CORPORATION NAME:

Parsons Environment & Infrastructure Group Inc.

DUE DATE: **3/31/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1464199**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4701 HEDGEMORE DR

CITY/ST/ZIP: CHARLOTTE, NC 28209

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

		<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	VIRGINIA GREBBIEN		
TITLE:	PRESIDENT		
ADDRESS:	100 WEST WALNUT STREET		
CITY/ST/ZIP/CO:	PASADENA, CA 91124		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	RICHARD M HENDERSON		
TITLE:	VICE PRESIDENT		
ADDRESS:	100 W WALNUT ST		
CITY/ST/ZIP/CO:	PASADENA, CA 91124		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CARLTON E WILLIAMS		
TITLE:	ASST SEC		
ADDRESS:	16055 SPACE CENTER BLVD		
CITY/ST/ZIP/CO:	HOUSTON, TX 77062		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	LESLIE S BRADLEY		
TITLE:	TREASURER		
ADDRESS:	4701 HEDGEMORE DRIVE		
CITY/ST/ZIP/CO:	CHARLOTTE, NC 28209		

		<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CLYDE E ELLIS JR		
TITLE:	SECRETARY		
ADDRESS:	100 M STREET SE		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20003		

		<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	GEORGE L BALL		
TITLE:	DIRECTOR		
ADDRESS:	100 WEST WALNUT STREET		
CITY/ST/ZIP/CO:	PASADENA, CA 91124		

NAME: THOMAS L ROELL TITLE: DIRECTOR ADDRESS: 100 W WALNUT ST CITY/ST/ZIP/CO: PASADENA, CA 91124	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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NAME: JAMES R SHAPPELL TITLE: DIRECTOR ADDRESS: 100 M STREET SE CITY/ST/ZIP/CO: WASHINGTON, DC 20003	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ CARLTON E WILLIAMS	CARLTON E WILLIAMS, ASST SEC	3/13/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.