

1.) CORPORATION NAME:

DUE DATE: **3/31/2014**

Bechtel Enterprises Holdings, Inc.

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1889734**

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

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMV	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 12011 SUNSET HILLS ROAD

CITY/ST/ZIP: RESTON, VA 20190

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.

<p>NAME: ERIC GRENFELL TITLE: PRESIDENT ADDRESS: 12011 SUNSET HILLS ROAD CITY/ST/ZIP/CO: RESTON, VA 20190</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL ADAMS TITLE: SENIOR VP ADDRESS: 12011 SUNSET HILLS ROAD CITY/ST/ZIP/CO: RESTON, VA 20190</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: MICHAEL BAILEY TITLE: SENIOR VP ADDRESS: 50 BEALE ST CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94105</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: PETER ARNONE TITLE: VICE PRESIDENT ADDRESS: 50 BEALE ST CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94105</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: DAVID BLAISDELL TITLE: VICE PRESIDENT ADDRESS: 12011 SUNSET HILLS ROAD CITY/ST/ZIP/CO: RESTON, VA 20190</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: JEFFREY BLEE TITLE: VICE PRESIDENT ADDRESS: 50 BEALE STREET CITY/ST/ZIP/CO: SAN FRANCISCO, CA 94105</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN DESHONG PRINCIPAL VP 50 BEALE STREET SAN FRANCISCO, CA 94105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOSEPH FEYDER VICE PRESIDENT 5275 WESTVIEW DRIVE FREDERICK, MD 21703	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL JONES VICE PRESIDENT 50 BEALE STREET SAN FRANCISCO, CA 94105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KEREM KUSI VICE PRESIDENT 11 PILGRIM STREET LONDON, EC4V , UNITED KINGDOM (GREAT BRITAIN) , , FN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN MALARKEY VICE PRESIDENT 12011 SUNSET HILLS ROAD RESTON, VA 20190	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALAN MAWDSLEY PRINCIPAL VP 5275 WESTVIEW DR FREDERICK, MD 21703	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	BARBARA O'BOYLE VICE PRESIDENT 750 9TH STREET NW SUITE 450 WASHINGTON, DC 20001	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ERIC PARKER PRINCIPAL VP 50 BEALE ST SAN FRANCISCO, CA 94105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ART PILZER VICE PRESIDENT 750 9TH STREET NW SUITE 450 WASHINGTON, DC 20001	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY QUAZZO VP / SECRETARY 50 BEALE STREET SAN FRANCISCO, CA 94105	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY ROEHL VICE PRESIDENT 5275 WESTVIEW DRIVE FREDERICK, MD 21703	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

NAME:	M ANETTE SPARKS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRINCIPAL VP		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	RALPH ZIMMERMANN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	KEVIN LEADER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PVP/TREASURER		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	NELLIE LEE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	ANNA LIU	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CONTROLLER		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	ELDYNE PERROU	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	KIMBERLEY SCHAFER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		
NAME:	WILLIAM DUDLEY, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12011 SUNSET HILLS ROAD		
CITY/ST/ZIP/CO:	RESTON, VA 20190		
NAME:	CARLOS A RUIZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRINCIPAL VP		
ADDRESS:	12011 SUNSET HILLS ROAD		
CITY/ST/ZIP/CO:	RESTON, VA 20190		
NAME:	J. RUSS MILLER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	12011 SUNSET HILLS ROAD		
CITY/ST/ZIP/CO:	RESTON, VA 20190		
NAME:	PEGGY H RESTIVO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST CONTROLLER		
ADDRESS:	50 BEALE STREET		
CITY/ST/ZIP/CO:	SAN FRANCISCO, CA 94105		

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/ PETER ARNONE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PETER ARNONE, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	3/11/2014 DATE
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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.