TOWN OF DAVIE
TOWN COUNCIL AGENDA REPORT

TO: Mayor and Councilmembers

FROM/PHONE: Herb Hyman/797-1016

PREPARED BY: Herb Hyman/797-1016

SUBJECT: Resolution

AFFECTED DISTRICT: All

ITEM REQUEST: **Schedule for Council Meeting**

TITLE OF AGENDA ITEM: SELECTION OF FIRMS - A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING VARIOUS FIRMS TO PERFORM CONTINUING ENGINEERING SERVICES AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AGREEMENTS FOR SUCH SERVICES.

REPORT IN BRIEF: F.S.S. 287.055 defines "continuing services" as a study activity where the professional fee is less than $50,000 or any construction project where the cost of construction is less than $1,000,000. The Town anticipates many projects that will fall into this range over the next several years. A competitive solicitation was conducted for the following eight (8) disciplines: civil engineering, environmental engineering, traffic engineering, civil engineering inspections, land surveying, structural engineering, electrical engineering, and mechanical engineering services. RFP documents were sent to forty-five (45) prospective proposers. Additionally, the bid was advertised state-wide in Florida Bid Reporting and nationally in BidNet and also posted on the Town's web site. The Town received twenty-nine (29) proposals. The selection committee reviewed proposals and heard oral presentations from the top ranked firms. The selection committee feels that an award to the top three (3) firms in each discipline will allow maximum flexibility and availability of resources to accomplish projects in the most expeditious and economical fashion. The recommendation of the top three (3) firms is listed in Attachment "A". The initial contract is a three (3) year term with an option to extend the contract for an additional three (3) year term by mutual agreement of the parties. Contract extensions, if appropriate, will be sent to the Town Council for approval.

PREVIOUS ACTIONS: n/a

CONCURRENCES: The selections were made by a selection committee comprised of the following nine (9) staff members: Herb Hyman, William Ackerman, Russell Muniz, Manny Diez, Keith Pursell, Bill Hitchcock, Le Nguyen, Will Allen, and Bruce Taylor.

FISCAL IMPACT: Yes

Has request been budgeted? Yes

If yes, expected cost: Dependent on number of projects authorized

Account Name: various capital improvement accounts and operating budget accounts

RECOMMENDATION(S): Motion to approve the resolution.

Attachment(s): Procurement Authorization, Selection Committee Recommendation (Attachment "A"), Recommendation memo, Selection Committee ranking sheets, Incorporation information

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, SELECTING VARIOUS FIRMS TO PERFORM CONTINUING ENGINEERING SERVICES AND AUTHORIZING THE TOWN ADMINISTRATOR OR HIS DESIGNEE TO NEGOTIATE AGREEMENTS FOR SUCH SERVICES.

WHEREAS, the Town has various projects that will fall within the limits of the "continuing services" category as defined by F.S.S. 287.055; and

WHEREAS, the Town solicited sealed proposals for such services; and

WHEREAS, the selection committee has selected the top three (3) firms in each discipline as the firms best qualified to provide the required services; and

WHEREAS, it is in the Town's best interest to execute contracts for such services.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA:

SECTION 1. The Town Council of the Town of Davie does hereby accept the selection of the firms identified in Attachment "A" as the firms best qualified to provide the required services and authorizes the Town Administrator or his designee to negotiate agreements for such services and present those contracts for approval at a future meeting date. Should no agreement be reached with any of the highest ranking firms, then the Town Administrator or his designee shall negotiate with the next ranked firm and present that agreement for approval.

SECTION 2 The initial contract is three (3) years with an option to extend the contract for an additional three (3) year term by mutual agreement of the parties. Contract extensions, if appropriate, will be handled administratively by staff subject to budgetary approval by the Town Council.

SECTION 2. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS _____ DAY OF _____, 2008

_____

_____

MAYOR/COUNCILMEMBER

Attest:

_____

TOWN CLERK

APPROVED THIS _____ DAY OF _____, 2008

TOWN OF DAVIE
PROCUREMENT AUTHORIZATION

ACCOUNT NUMBER.	BUDGET ITEM & DESCRIPTION	APPROXIMATE COST
OPERATING BUDGET ACCOUNTS OF USING DEPTS.	Engineering Continuing Services	DEPENDENT ON NUMBER OF APPROVED PROJECTS

METHOD OF PROCUREMENT (check the one that applies)

___ Open Competitive Bidding
___ Piggyback on Contract Number_____
___ Sole Source
✓ Request For Qualifications

SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED

Signed _____
Department Head

Have Funds been Reserved N/A - NO ACCOUNT OR AMOUNT SPECIFIED

Date 6/20/08 Signed _____

Signed _____
Town Administrator

BIDS SUBMITTED

VENDOR	COST
TWENTY-NINE (29) RESPONSES ALL RESPONSES RECORDED ON ATTACHED BID OPENING REPORT	TO BE NEGOTIATED WITH THE SELECTED VENDORS

Signed _____
Procurement Manager

BID SPECIFICATION COMMITTEE'S RECOMMENDATION

Vendor	Cost
TOP THREE VENDORS FOR EACH DISCIPLINE PER ATTACHED MEMO	TO BE NEGOTIATED

BID OPENING REPORT

BID NAME: Eng. & Surveying Services
Misc. Cont. Services

TIME: 2:23pm

BID NUMBER: B-08-100

DATE: 7.17.08

ESTIMATED COST: _____

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	GRAVEN THOMPSON	See Attached Proposals	
2.	STONER & ASSOC.		
3.	PILLAR CONSULTANTS		
4.	GALVIN & GIORDANO		
5.	ADA ENGINEERING		
6.	SUN TECH		
7.	C3TS ENGINEERING		
8.	ROSS ENGINEERING		
9.	EISMAN & RUSSO		
10.	HSQ GROUP		

REMARKS

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: _____ DATE: _____

WITNESS: Angela Salinas DATE: 7.17.08

BID OPENING REPORT

BID NAME: Eng. & Surveying Services Misc. Cont. Services

TIME: 2:23 p.m.

BID NUMBER: B-08-100

DATE: 7-17-08

ESTIMATED COST: _____

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	EISENA	See Attached Proposals	
2.	GLE ASSOCIATES		
3.	KING ENGINEERING		
4.	KIMLEY HORN		
5.	CPH ENGINEERS		
6.	CHEN & ASSOC.		
7.	KITTELSON & ASSOC.		
8.	BOTECK THURLOW ENG.		
9.	KEITH & SCHNARS		
10.	R.J. BEHAR		

REMARKS

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: _____ DATE: _____

WITNESS: Angela Salinas DATE: 7.17.08

BID OPENING REPORT

BID NAME: Eng. & Surveying Services
Misc. Cont. Services

TIME: 2:23pm

BID NUMBER: B-08-100

DATE: 7-17-08

ESTIMATED COST: _____

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	McLAUGHLIN ENG.	See Attache	Proposals
2.	CARNAHAN, PROCTOR & CROSS		
3.	BEISWENGER, HOCH & ASSOC.		
4.	F.R. ALEMAN & ASSOC.		
5.	KEITH & ASSOCIATES		
6.	MILLER LEGG		
7.	Biscayne Engineering		
8.	URS CORPORATION		
9.	PULICE LAND SURVEYORS		
10.			

REMARKS

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: _____ DATE: _____

WITNESS: Angela Salinas DATE: 7-17-08

Attachment "A"

MEMORANDUM

Department of Budget and Finance

To: Mayor and Town Council

From: Herb Hyman, CPPB, Procurement Manager

Through: William Ackerman, Budget and Finance Director

Subject: Miscellaneous Engineering Services

Date: August 20, 2008

The Town has a need for continuing engineering services contracts. It is the desire of the Town to award contracts to three (3) firms in each discipline. Florida State Statutes defines "continuing services" as any study where the cost for professional services is less than $50,000 or any construction project where the cost of construction is less than $1,000,000. Listed below are the selection committee's recommendation which was arrived at after reviewing proposals and hearing oral presentations from short listed firms.

Civil Engineering Services
Craven Thompson
Calvin Giordano
ADA Engineering

Environmental Engineering Services
URS Corporation
Calvin Giordano
C3TS

Traffic Engineering Services
C3TS
R.J. Behar
URS Corporation

Civil Engineering Inspection Services
Calvin Giordano
Craven Thompson
R.J. Behar

Land Surveying Services
Miller Legg & Associates
Stoner & Associates
McLaughlin Engineering

Structural Engineering
Beiswenger Hoch
C3TS
R.J. Behar

Electrical Engineering
C3TS
GLE Associates
Calvin Giordano

Mechanical Engineering
GLE Associates
C3TS
URS Corporation

	A	B	C	D	E	F	G
1							
2							
3				CIVIL ENGINEERING			
4							
5							
6	COMMITTEE MEMBER	R. J.	A.D.A.	ROSS	URS	CALVIN	CRAVEN
7		BEHAR	ENG.	ENG.		GIORDANO	THOMPSON
8							
9	W. ACKERMAN	2	1	5	6	4	3
10	R. MUNIZ		A B S E N T				
11	M. DIEZ	3	1	6	5	4	2
12	L. NGUYEN	2	4	6	5	3	1
13	B. HITCHCOCK	5	4	6	3	1	2
14	B. TAYLOR	6	3	5	4	2	1
15	W. ALLEN	4	2	6	5	3	1
16	K. PURSELL	3	4	6	5	2	1
17	H. HYMAN	2	3	6	5	4	1
18							
19	TOTAL	27	26	46	38	23	12
20							
21	RANKING	4TH	3RD	6TH	5TH	2ND	1ST

	A	B	C	D	E	F
1						
2						
3			ENVIRONMENTAL ENGINEERING			
4						
5						
6	COMMITTEE MEMBER	C3TS	URS	CALVIN	CHEN &	ADA
7				GIORDANO	ASSOCIATES	ENG
8						
9	W. ACKERMAN	3	1	2	4	N/A
10	R. MUNIZ	4	1	2	3	N/A
11	M. DIEZ	2	1	3	4	N/A
12	L. NGUYEN	3	2	1	4	N/A
13	B. HITCHCOCK	3	1	2	4	N/A
14	B. TAYLOR	3	2	1	4	N/A
15	W. ALLEN	2	3	1	4	N/A
16	K. PURSELL	2	1	3	4	N/A
17	H. HYMAN	3	1	2	4	N/A
18						
19	TOTAL	25	13	17	35	N/A
20						
21	RANKING	3RD	1ST	2ND	4TH	—

	A	B	C	D	E
1					
2					
3			TRAFFIC ENGINEERING		
4					
5					
6	COMMITTEE MEMBER	CALVIN	C3TS	URS	R.J.
7		GIORDANO			BEHAR
8					
9	W. ACKERMAN		A B S E N T		
10	R. MUNIZ	N/A	1	3	2
11	M. DIEZ	N/A	1	3	2
12	L. NGUYEN	N/A	1	3	2
13	B. HITCHCOCK	N/A	1	3	2
14	B. TAYLOR	N/A	1	3	2
15	W. ALLEN	N/A	1	2	3
16	K. PURSELL	N/A	1	2	3
17	H. HYMAN	N/A	2	3	1
18					
19	TOTAL	N/A	9	22	17
20					
21	RANKING	N/A	1ST	3RD	2ND
22					

	A	B	C	D	E
1					
2					
3			CIVIL ENGINEERING INSPECTIONS		
4					
5					
6	COMMITTEE MEMBER	C3TS	CRAVEN	CALVIN	R.J.
7			THOMPSON	GIORDANO	BEHAR
8					
9	W. ACKERMAN	4	3	2	1
10	R. MUNIZ	4	2	1	3
11	M. DIEZ	1	4	2	3
12	L. NGUYEN	4	2	1	3
13	B. HITCHCOCK	4	1	2	3
14	B. TAYLOR	4	2	1	3
15	W. ALLEN	2	3	1	4
16	K. PURSELL	4	2	1	3
17	H. HYMAN	3	4	1	2
18					
19	TOTAL	30	23	12	25
20					
21	RANKING	4TH	2ND	1ST	3RD

	A	B	C	D	E	F
1						
2						
3			SURVEYING SERVICES			
4						
5						
6	COMMITTEE MEMBER	STONER &	MILLER	CRAVEN	CALVIN	MCLAUGHLIN
7		ASSOC	LEGG	THOMPSON	GIORDANO	ENGINEERING
8						
9	W. ACKERMAN		A B S E N T			
10	R. MUNIZ	1	3	4	5	2
11	M. DIEZ	2	3	4	5	1
12	L. NGUYEN	5	1	4	2	3
13	B. HITCHCOCK	1	3	5	4	2
14	B. TAYLOR	3	1	5	2	4
15	W. ALLEN	3	1	4	2	5
16	K. PURSELL	2	1	4	5	3
17	H. HYMAN	1	2	3	5	4
18						
19	TOTAL	18	15	33	30	24
20						
21	RANKING	2ND	1ST	5th	4th	3RD
22						

	A	B	C	D	E	F
1						
2						
3			STRUCTURAL ENGINEERING			
4						
5						
6	COMMITTEE MEMBER	ROSS	R.J.	BEISWENGER	URS	C3TS
7		ENG	BEHAR	& HOCH		
8						
9	W. ACKERMAN		ABSENT			
10	R. MUNIZ	5	1	2	4	3
11	M. DIEZ	5	3	4	1	2
12	L. NGUYEN		ABSENT			
13	B. HITCHCOCK	5	2	1	3	4
14	B. TAYLOR	5	2	1	3	4
15	W. ALLEN	5	2	3	4	1
16	K. PURSELL	5	3	4	2	1
17	H. HYMAN	5	4	1	3	2
18						
19	TOTAL	35	17	16	20	17
20						
21	RANKING	5TH	2ND	1ST	4TH	2ND

	A	B	C	D	E	F
1						
2						
3			ELECTRICAL ENGINEERING			
4						
5						
6	COMMITTEE MEMBER	GLE	R.J.	C3TS	URS	CALVIN
7		ASSOCIATES	BEHAR			GIORDANO
8						
9	W. ACKERMAN		ABSENT			
10	R. MUNIZ	2	4	1	5	3
11	M. DIEZ	1	5	3	4	2
12	L. NGUYEN		ABSENT			
13	B. HITCHCOCK	4	5	3	2	1
14	B. TAYLOR	3	4	2	5	1
15	W. ALLEN	3	5	1	4	2
16	K. PURSELL	1	4	2	3	5
17	H. HYMAN	1	5	3	4	2
18						
19	TOTAL	15	32	15	27	16
20						
21	RANKING	1ST	5TH	1ST	4TH	3RD

	A	B	C	D	E	F
1						
2						
3			MECHANICAL ENGINEERING			
4						
5						
6	COMMITTEE MEMBER	GLE	R.J.	C3TS	URS	ROSS
7		ASSOCIATES	BEHAR			ENGINEERING
8						
9	W. ACKERMAN		ABSENT			
10	R. MUNIZ	1	3	2	5	4
11	M. DIEZ	1	5	2	3	4
12	L. NGUYEN		ABSENT			
13	B. HITCHCOCK	1	4	3	2	5
14	B. TAYLOR	2	3	1	4	5
15	W. ALLEN	2	5	1	3	4
16	K. PURSELL	1	4	2	3	5
17	H. HYMAN	1	4	2	3	5
18						
19	TOTAL	9	28	13	23	32
20						
21	RANKING	1ST	4TH	2ND	3RD	5TH

Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
MCLAUGHLIN ENGINEERING CO.

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☑ Corporation ☐ Partnership
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶
☐ Other (see instructions) ▶

☐ Exempt payee

Address (number, street, and apt. or suite no.)
400 N. E. 3RD AVENUE

Requester's name and address (optional)

City, state, and ZIP code
FORT LAUDERDALE, FL 33301

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

or

Employer identification number
59 0754337

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶ Diane R. Donahue Date ▶ 7/11/2008

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Vendor/ Bidder Disclosure

I, Jerald A. McLaughlin, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: McLaughlin Engineering Co.
Address: 400 NE 3rd Avenue,
Fort Lauderdale, FL 33301
FEIN: 59 – 0754337
State and date of incorporation: Florida

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contact or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Jerald A. McLaughlin	400 NE 3rd Avenue Ft. Lauderdale, FL 33301	71%
Carl E. Albrektsen	400 NE 3rd Avenue Ft. Lauderdale, FL 33301	9%
Scott A. McLaughlin	400 NE 3rd Avenue Ft. Lauderdale, FL 33301	10%
Diana L. Donahoe	400 NE 3rd Avenue Ft. Lauderdale, FL 33301	10%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
NONE	

By: _____ Date: July 14th, 2008
Signature of Affiant

Jerald A. McLaughlin
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 14th day of July, 2008, by Jerald A. McLaughlin, he/she is personally known to me or has presented _____ as identification.

Diana L. Donahoe
Notary Public, State of Florida at Large

DIANA L. DONAHOE
MY COMMISSION # DD 414288
EXPIRES: August 2, 2009
Bonded Thru Notary Public Underwriters

Diana L. Donahoe
Print or Stamp of Notary

DD 414288
Serial Number

My Commission Expires: August 2, 2008

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Profit Corporation

MCLAUGHLIN ENGINEERING COMPANY

Filing Information

Document Number	189168
FEI Number	590754337
Date Filed	11/26/1955
State	FL
Status	ACTIVE

Principal Address

MCLAUGHLIN ENGINEERING CO
400 NE 3RD AVE
FORT LAUDERDALE FL 33301 US

Changed 01/27/2003

Mailing Address

MCLAUGHLIN ENGINEERING CO
400 NE 3RD AVE
FORT LAUDERDALE FL 33301 US

Changed 01/27/2003

Registered Agent Name & Address

MCLAUGHLIN, JERALD A
400 N E 3RD AVE
FT LAUDERDALE FL 33301 US

Name Changed: 01/19/2000

Address Changed: 04/15/1998

Officer/Director Detail

Name & Address

Title VPTS

ALBREKTSEN, CARL E
400 NE 3RD AVE
FORT LAUDERDALE FL 33301

Title VP

MCLAUGHLIN, JOSEPH S
400 N E 3RD AVE
FORT LAUDERDALE FL 33301

Title P

MCLAUGHLIN, JERALD A
400 N.E. 3RD AVE.
FT. LAUDERDALE FL 33301

Title VP

MCLAUGHLIN, SCOTT A
400 NE 3RD AVENUE
FORT LAUDERDALE FL 33301

Title SECR

DONAHOE, DIANA L
400 NE 3RD AVE
FORT LAUDERDALE FL 33301

Annual Reports

Report Year	Filed Date
2006	01/20/2006
2007	01/05/2007
2008	01/31/2008

Document Images

01/31/2008 -- ANNUAL REPORT	View image in PDF format
01/05/2007 -- ANNUAL REPORT	View image in PDF format
01/20/2006 -- ANNUAL REPORT	View image in PDF format
01/31/2005 -- ANNUAL REPORT	View image in PDF format
01/15/2004 -- ANNUAL REPORT	View image in PDF format
01/27/2003 -- ANNUAL REPORT	View image in PDF format
01/22/2002 -- ANNUAL REPORT	View image in PDF format
02/26/2001 -- ANNUAL REPORT	View image in PDF format
01/19/2000 -- ANNUAL REPORT	View image in PDF format
02/26/1999 -- ANNUAL REPORT	View image in PDF format
04/15/1998 -- ANNUAL REPORT	View image in PDF format
04/17/1997 -- ANNUAL REPORT	View image in PDF format
02/02/1996 -- ANNUAL REPORT	View image in PDF format
02/14/1995 -- ANNUAL REPORT	View image in PDF format

Note: This is not official record. See documents if question or conflict.

Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
Craven Thompson & Associates, Inc.

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☑ Corporation ☐ Partnership ☐ Other ▶ ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
3563 NW 53rd Street

Requester's name and address (optional)

City, state, and ZIP code
Fort Lauderdale, FL 33309

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
| | | | | | | | | |

or

Employer identification number
5 9 - 0 9 4 8 0 2 9

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Robert D. Cole, III, P.E. Date ▶ July 17, 2008

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Cat. No. 10231X Form **W-9** (Rev. 11-2005)

Vendor / Bidder Disclosure

I, **Robert D. Cole, III, P.E.**, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm or Organization:	**Craven Thompson & Associates, Inc.**
Address:	**3563 N.W. 53rd Street**
	Fort Lauderdale, Florida 33309
FEIN	**59-0948029**
State and Date of Incorporation	**Florida**

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and addresses are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Thomas M. McDonald,	**3563 NW 53rd St., Ft. Lauderdale, FL 33309**	**90** %
Robert D. Cole, III, P.E.,	**3563 NW 53rd St., Ft. Lauderdale, FL 33309**	**10** %
		%
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
N/A	

By: _____ Date: **July 17, 2008**
Signature of Affiant

Robert D. Cole, III, P.E.
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this **17th** day of **July**, 2008, by **Robert D. Cole, III, P.E.**, he/she is personally known to me or has presented _____ as identification.

NOTARY PUBLIC-STATE OF FLORIDA
Patricia D. Joyce
Commission # DD514119
Expires: MAR. 23, 2010
Bonded Thru Atlantic Bonding Co., Inc.

Patricia D. Joyce
Notary Public, State of Florida at Large

PATRICIA D. JOYCE
Print or Stamp of Notary

DD514119
Serial Number

My Commission Expires: 3/23/10

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Profit Corporation

CRAVEN, THOMPSON & ASSOCIATES, INC.

Filing Information

Document Number	254407
FEI Number	590948029
Date Filed	01/01/1962
State	FL
Status	ACTIVE
Last Event	AMENDED AND RESTATED ARTICLES
Event Date Filed	10/17/1994
Event Effective Date	NONE

Principal Address

3563 NW 53RD STREET
FORT LAUDERDALE FL 33309

Changed 06/14/1990

Mailing Address

3563 NW 53RD STREET
FORT LAUDERDALE FL 33309

Changed 06/14/1990

Registered Agent Name & Address

MCDONALD, THOMAS M PRES
3563 NW 53RD ST
FT LAUDERDALE FL 33309 US

Name Changed: 01/03/2006

Address Changed: 02/22/1995

Officer/Director Detail

Name & Address

Title DPT

MCDONALD, THOMAS

7630 MARBLEHEAD LANE
PARKLAND FL 33067

Title VS

COLE, ROBERT
1629 SE 2ND COURT
FT. LAUDERDALE FL 33301

Title V

HANDLEY, JOSEPH D
1734 N.E. 20TH AVE. UNIT#3
FT. LAUDERDALE FL 33305

Title V

PRYCE, RICHARD
13901 SW 26TH STREET
DAVIE FL 33326

Annual Reports

Report Year	Filed Date
2006	01/03/2006
2007	01/08/2007
2008	01/14/2008

Document Images

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03/09/2000 -- ANNUAL REPORT	View image in PDF format
02/09/1999 -- ANNUAL REPORT	View image in PDF format
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02/22/1995 -- ANNUAL REPORT	View image in PDF format

Note: This is not official record. See documents if question or conflict.

Previous on List Next on List Return To List

Events Name History

Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
Miller Legg & Associates, Inc. dba Miller Legg

Business name, if different from above
Miller Legg

Check appropriate box: ☐ Individual/Sole proprietor ☒ Corporation ☐ Partnership
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶
☐ Other (see instructions) ▶

☐ Exempt payee

Address (number, street, and apt. or suite no.)

Requester's name and address (optional)

City, state, and ZIP code
1800 N. Douglas Road, Suite 200, Pembroke Pines, FL 33024

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
: :

or

Employer identification number
65 : 0563467

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶ [signature] Date ▶ 7-3-2008

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Town of Davie
Vendor/Bidder Disclosure

I, Dan A. Tintner, PE being first duly sworn state that:
The full Leal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: Miller Legg & Associates, Inc.

Address: 1800 N. Douglas Road, Suite 200
Pembroke Pines, FL 33024

FEIN 65-0563467

State and date of incorporation Florida, April 1, 1995

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
David L. John	1800 N Douglas Road, Suite 200 Pembroke Pines, FL 33024	16.652 %
Dan A. Tintner	1800 N Douglas Road, Suite 200 Pembroke Pines, FL 33024	11.942 %
Dennis Thomas	1800 N Douglas Road, Suite 200 Pembroke Pines, FL 33024	7.609 %
Jon Walls	1800 N Douglas Road, Suite 200 Pembroke Pines, FL 33024	8.49 %
Michael D. Kroll	1800 N Douglas Road, Suite 200 Pembroke Pines, FL 33024	8.747 %
Dylan Larson	1800 N Douglas Road, Suite 200 Pembroke Pines, FL 33024	7.401 %
Leslie N. Hernandez	1800 N Douglas Road, Suite 200 Pembroke Pines, FL 33024	6.56 %
William M. Lynch	1800 N Douglas Road, Suite 200 Pembroke Pines, FL 33024	6.224 %

2. The full legal names and business addresses of any other individual (other than subconsultants, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
N/A	

By: _____ Date: 7-3-08
Signature of Affiant

Dan A. Tintner, PE
Print Name

SUBSCRIBED AND SWORN TO of affirmed before me this 3rd day of July 2008, by Dan A. Tintner, he/she is Personally known to me or has presented _____ as Identification.

_____
Notary Public, State of Florida at Large

ROBERTA M. DUENAS
MY COMMISSION # DD 542711
EXPIRES: April 20, 2010
Bonded Thru Notary Public Underwriters

_____
Print or Stamp of Notary

_____
Serial Number

My Commission Expires: _____

Detail by Entity Name

Florida Profit Corporation

MILLER, LEGG & ASSOCIATES, INC.

Filing Information

Document Number	P95000021117
FEI Number	650563467
Date Filed	03/15/1995
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	06/25/2003
Event Effective Date	NONE

Principal Address

1800 N. DOUGLAS ROAD
SUITE 200
PEMBORKE PINES FL 33024 US

Changed 05/01/1996

Mailing Address

1800 N. DOUGLAS ROAD
SUITE 200
PEMBORKE PINES FL 33024 US

Changed 05/01/1996

Registered Agent Name & Address

JOHN, DAVID L
1800 N. DOUGLAS ROAD
SUITE 200
PEMBORKE PINES FL 33024 US

Name Changed: 03/12/2004

Address Changed: 05/01/1996

Officer/Director Detail

Name & Address

Title CP

JOHN, DAVID L
2450 SOUTHWEST 85TH TERRACE
DAVIE FL 33324 US

Title VPDS

TINTNER, DAN A
10741 PARIS STREET
COOPER CITY FL 33026 US

Title AVP

THOMAS, DENNIS J
14398 BLACKBERRY DRIVE
WELLINGTON FL 33414

Title D

WALLS, JON D
1405 HAZELWOOD DRIVE
ORLANDO FL 32806

Title V

KROLL, MICHAEL D
1297 TERRYSTONE COURT
WESTON FL 33326

Title VP

LYNCH, WILLIAM M
2431 LARGO DRIVE
MIRAMAR FL 33023

Annual Reports

Report Year	Filed Date
2007	03/19/2007
2007	11/16/2007
2008	04/24/2008

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03/28/2005 -- ANNUAL REPORT	View image in PDF format
03/12/2004 -- ANNUAL REPORT	View image in PDF format
07/30/2003 -- ANNUAL REPORT	View image in PDF format
06/25/2003 -- Amendment	View image in PDF format
04/24/2002 -- ANNUAL REPORT	View image in PDF format
04/14/2001 -- ANNUAL REPORT	View image in PDF format

10/12/2000 -- Amendment	View image in PDF format
05/16/2000 -- ANNUAL REPORT	View image in PDF format
04/19/2000 -- ANNUAL REPORT	View image in PDF format
07/19/1999 -- ANNUAL REPORT	View image in PDF format
04/15/1999 -- ANNUAL REPORT	View image in PDF format
09/14/1998 -- ANNUAL REPORT	View image in PDF format
06/25/1998 -- Merger	View image in PDF format
04/22/1998 -- ANNUAL REPORT	View image in PDF format
02/04/1997 -- ANNUAL REPORT	View image in PDF format
05/01/1996 -- ANNUAL REPORT	View image in PDF format
03/15/1995 -- DOCUMENTS PRIOR TO 1997	View image in PDF format

Note: This is not official record. See documents if question or conflict.

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Copyright © 2007 State of Florida, Department of State.

Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
Calvin, Giordano & Associates, Inc.

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☒ Corporation ☐ Partnership ☐ Other ▶ ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
1800 Eller Drive, Suite 600

Requester's name and address (optional)

City, state, and ZIP code
Fort Lauderdale, Florida 33316

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
| | | - | | | - | | | | |

or

Employer identification number
6 5 - 0 0 1 3 8 6 9

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Date ▶ July 16, 2008

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Vendor/Bidder Disclosure

I, Dennis J. Giordano, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: Calvin, Giordano & Associates, Inc.

Address: 1800 Eller Drive, Suite 600
Fort Lauderdale, Florida 33316

FEIN 65-0013869

State and date of incorporation Florida, 1985

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Dennis J. Giordano- President	1800 Eller Dr., Ste 600, Fort Lauderdale, FL. 33316	24 %
John Downes, PE- Executive VP	Same as Above	15 %
Shelley Eichner, AICP - Vice President	Same as Above	15 %
ESOP	Same as Above	46 %

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
Not Applicable	

By: _____ Date: July 16, 2008

Signature of Affiant

Dennis J. Giordano

Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 16th day of July 2008, by Dennis Giordano, he/she is personally known to me or has presented _____ as identification.

Notary Public State of Florida
Jana Glass
My Commission DD678904
Expires 05/28/2011

Notary Public, State of Florida at Large

Jana Glass

Print or Stamp of Notary

DD678904

Serial Number

My Commission Expires: 5/28/11

Detail by Entity Name

Florida Profit Corporation

CALVIN, GIORDANO & ASSOCIATES, INC.

Filing Information

Document Number	M17373
FEI Number	650013869
Date Filed	06/27/1985
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	03/20/2001
Event Effective Date	NONE

Principal Address

1800 ELLER DR
STE 600
FORT LAUDERDALE FL 33316

Changed 04/02/2001

Mailing Address

1800 ELLER DR
STE 600
FORT LAUDERDALE FL 33316

Changed 03/02/2000

Registered Agent Name & Address

GIORDANO, DENNIS J
1800 ELLER DR
STE 600
FORT LAUDERDALE FL 33316

Name Changed: 04/02/2001

Address Changed: 03/02/2000

Officer/Director Detail

Name & Address

Title PCD

GIORDANO, DENNIS J
1800 ELLER DR STE 600
FORT LAUDERDALE FL 33316

Title V

DOWNES, JOHN
1800 ELLER DR STE 600
FORT LAUDERDALE FL 33316

Title V

JACKSON, ROBERT
1800 ELLER DR STE 600
FORT LAUDERDALE FL 33316

Title V

COOK-WEEDEN, TAMMY
1800 ELLER DR STE 600
FORT LAUDERDALE FL 33316

Title ST

GLASS, JANA
1800 ELLER DR STE 600
FORT LAUDERDALE FL 33316

Annual Reports

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07/02/2004 -- ANNUAL REPORT	View image in PDF format
01/27/2003 -- ANNUAL REPORT	View image in PDF format
03/13/2002 -- ANNUAL REPORT	View image in PDF format
04/02/2001 -- ANNUAL REPORT	View image in PDF format
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03/02/2000 -- ANNUAL REPORT	View image in PDF format
02/24/1999 -- ANNUAL REPORT	View image in PDF format
01/27/1998 -- ANNUAL REPORT	View image in PDF format
02/10/1997 -- ANNUAL REPORT	View image in PDF format

02/06/1996 -- ANNUAL REPORT View image in PDF format

01/25/1995 -- ANNUAL REPORT View image in PDF format

Note: This is not official record. See documents if question or conflict.

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Entity Name

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Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
Beiswenger, Hoch & Associates, Inc.

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☑ Corporation ☐ Partnership
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶
☐ Other (see instructions) ▶

☑ Exempt payee

Address (number, street, and apt. or suite no.)
510 Shotgun Road, Suite 400

Requester's name and address (optional)

City, state, and ZIP code
Sunrise, FL 33326

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number

or

Employer identification number
59 0751610

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶ Jacquelyn R. Beisw Date ▶ 07/15/2008

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

I, Francisco A. Norona, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("town") are as follows (post Office addresses are not acceptable):

Name of individual, Firm or Organization:	Beiswenger, Hoch & Associates, Inc.
Address:	510 Shotgun Road, Suite 400
	Sunrise, FL 33326
FEIN:	59-0751610
State and date of incorporation:	Florida, June 29, 1955

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership	
Francisco A. Norona, President	510 Shotgun Rd. Ste 400, Sunrise, FL 33326	52.5	%
Gabriel F. Norona, Vice President	510 Shotgun Rd. Ste 400 Sunrise, FL 33326	25.0	%
Maria G. Alvarino, Secretary	510 Shotgun Rd. Ste 400 Sunrise, FL 33326	22.5	%
			%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers and lenders) who have, or will have, any legal equitable, or beneficial interest in the contract or business transaction with the Town are as follow (Post Office address are not acceptable).

Full Legal Name	Address

F. A. Norona

Francisco A. Norona
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 15th day of July 2008, by Francisco A. Norona, **he**/she is **personally known** to me or has presented _____ as identification.

Linda S. Scotece
Notary Public, State of Florida at Large

LINDA S. SCOTECE
MY COMMISSION # DD 711648
EXPIRES: December 13, 2011
Bonded Thru Notary Public Underwriters

Linda S. Scotece
Print or Stamp of Notary

DD 711648
Serial Number

My Commission Expires: 12/13/2011

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Profit Corporation

BEISWENGER, HOCH & ASSOCIATES, INC.

Filing Information

Document Number	186178
FEI Number	590751610
Date Filed	06/29/1955
State	FL
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	10/21/1965
Event Effective Date	NONE

Principal Address

510 SHOTGUN RD.
400
FORT LAUDERDALE FL 33326

Changed 02/03/2006

Mailing Address

510 SHOTGUN RD.
400
FORT LAUDERDALE FL 33326

Changed 02/03/2006

Registered Agent Name & Address

NORONA, FRANCISCO A.
510 SHOTGUN RD.
SUITE 400
FORT LAUDERDALE FL 33326 US

Address Changed: 02/03/2006

Officer/Director Detail

Name & Address

Title PD

NORONA, FRANCISCO
510 SHOTGUN RD. STE. #400
FORT LAUDERDALE FL 33326

Title VD

NORONA, GABRIEL
510 SHOTGUN RD., STE #400
FORT LAUDERDALE FL 33326

Title SD

ALVARINO, MARIA
510 SHOTGUN RD., STE #400
FORT LAUDERDALE FL 33326

Title T

DEUSER, JACQUELYN
510 SHOTGUN RD., STE #400
FORT LAUDERDALE FL 33326

Annual Reports

Report Year	Filed Date
2006	02/03/2006
2007	01/25/2007
2008	01/24/2008

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02/03/2006 -- ANNUAL REPORT	View image in PDF format
02/04/2005 -- ANNUAL REPORT	View image in PDF format
01/24/2004 -- ANNUAL REPORT	View image in PDF format
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01/23/2001 -- ANNUAL REPORT	View image in PDF format
02/05/2000 -- ANNUAL REPORT	View image in PDF format
02/19/1999 -- ANNUAL REPORT	View image in PDF format
02/03/1998 -- ANNUAL REPORT	View image in PDF format
02/10/1997 -- ANNUAL REPORT	View image in PDF format
03/05/1996 -- ANNUAL REPORT	View image in PDF format
04/13/1995 -- ANNUAL REPORT	View image in PDF format

Note: This is not official record. See documents if question or conflict.

Previous on List Next on List Return To List

Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
Corzo Castella Carballo Thompson Salman, P.A.

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☑ Corporation ☐ Partnership ☐ Other ▶ ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
901 Ponce de Leon Boulevard, Suite 900

Requester's name and address (optional)

City, state, and ZIP code
Coral Gables, Florida 33134

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
			–			–		

or

Employer identification number
6	5	–	0	0	3	9	4	9	3

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Date ▶ **06/16/08**

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Town of Davie
Vendor / Bidder Disclosure

obert T. Carballo, PE, being first duly sown state that:
: full name and business address of the person(s) or entity contracting with the Town of Davie
own") are as follows (Post Office addresses are not acceptable):

me of Individual, Firm or Organization: Corzo Castella Carballo Thompson Salman, P.A.

dress: 3996 N.W. 9th Avenue, Ft. Lauderdale, Florida 33309

IN: 650039493

ate and date of incorporation: State of Florida / March 1988

VNERSHIP DISCLOSURE AFFIDAVIT:

If the contract or business transaction is with a corporation, the full legal name and business dress shall be provided for each officer and director and each stockholder who directly or irectly holds five percent (5%) or more of the corporation's stock. If the contract or business nsaction is with a trust, the full name and address shall be provided for each trustee and each neficiary. All such names and addresses are as follows (Post Office addresses are not ceptable):

ll Legal Name	Address	Ownership
ge E. Corzo, PE	2665 SW 37 Avenue #1407, Miami, 33133	9.25%
mon Castella, PE	5911 SW 29 Street, Miami, FL 33155	24.14%
bert T. Carballo, PE	14371 SW 29 Street, Miami, FL 33175	24.14%
Roy Thompson, PE, PhD	15904 SW 61 Court, Davie, FL 33331	8.45%
vier F. Salman, AIA	1534 Mantua Avenue, Coral Gables, FL 33134	12.07%
rrance N. Glunt, PE	1455 SE 6 Street, Deerfield Beach, FL 33441	5.03%
alfrido J. Pevida, PE	8240 SW 34 Terrace, Miami, FL 33155	6.88%

The full legal names and business addresses of any other individual (other than bcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, uitable, or beneficial interest in the contract or business transaction with the Town are as lows (Post Office addresses are not acceptable):

ll Legal Name	Address
A	

SF 254 & 255

By: _____
Signature of Affiant

Date: July 16, 2008

Robert T. Carballo, P.E.
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 16th day of July 2008, by

X he/she is personally known to me or has presented _____

_____ as identification.

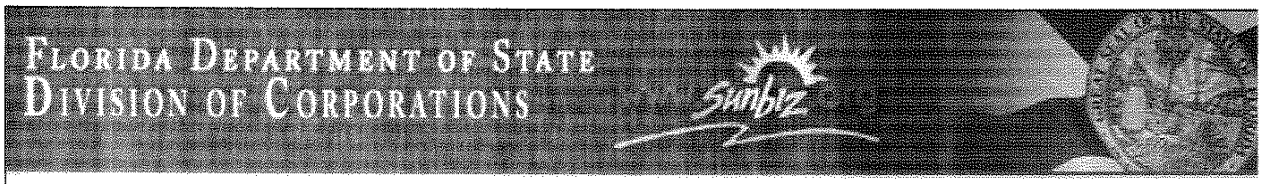
Grace Morales
Notary Public, State of Florida at Large

Print or Stamp of Notary

DD723249
Serial Number

My Commission Expires: 11/16/2011

Notary Public State of Florida
Grace Morales
My Commission DD723249
Expires 11/16/2011



Detail by Entity Name

Florida Profit Corporation

CORZO CASTELLA CARBALLO THOMPSON SALMAN, P.A.

Filing Information

Document Number	K19612
FEI Number	650039493
Date Filed	03/30/1988
State	FL
Status	ACTIVE
Effective Date	03/28/1988
Last Event	AMENDMENT
Event Date Filed	04/14/2006
Event Effective Date	NONE

Principal Address

901 PONCE DE LEON BLVD.
SUITE 900
CORAL GABLES FL 33134

Changed 04/28/1995

Mailing Address

901 PONCE DE LEON BLVD.
SUITE 900
CORAL GABLES FL 33134

Changed 04/28/1995

Registered Agent Name & Address

CASTELLA, RAMON
5911 SW 29 STREET
MIAMI FL 33155 US

Name Changed: 02/16/2007

Address Changed: 02/16/2007

Officer/Director Detail

Name & Address

Title VSD

SALMAN, JAVIER F.
1534 MANTUA AVE
CORAL GABLES FL 33146

Title VTD

CASTELLA, RAMON
5911 SW 29 STREET
MIAMI FL 33155

Title PD

CARBALLO, ROBERT T
14371 SW 29 STREET
MIAMI FL 33175

Title VD

CREWS, JEFFREY S
899 SW 12 AVENUE
BOCA RATON FL 33486

Title VD

PEVIDA, WALFRIDO J
8240 SW 34 TERRACE
MIAMI FL 33155

Title VD

GLUNT, TERRANCE N
1456 SE 6TH STREET
DEERFIELD BEACH FL 33441

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2007	01/12/2007
2007	02/16/2007
2008	04/21/2008

Document Images

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04/14/2006 -- Amendment	View image in PDF format
03/28/2006 -- ANNUAL REPORT	View image in PDF format
01/13/2005 -- ANNUAL REPORT	View image in PDF format
03/04/2004 -- ANNUAL REPORT	View image in PDF format
04/24/2003 -- ANNUAL REPORT	View image in PDF format
04/17/2002 -- ANNUAL REPORT	View image in PDF format
04/26/2001 -- ANNUAL REPORT	View image in PDF format

04/18/2000 -- ANNUAL REPORT	View image in PDF format
04/16/1999 -- ANNUAL REPORT	View image in PDF format
05/04/1998 -- ANNUAL REPORT	View image in PDF format
02/12/1997 -- ANNUAL REPORT	View image in PDF format
05/01/1996 -- ANNUAL REPORT	View image in PDF format
04/29/1995 -- ANNUAL REPORT	View image in PDF format

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Form **W-9**
(Rev. January 2003)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name
G.L.E. Associates, Inc.

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☑ Corporation ☐ Partnership ☐ Other ▶ ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
3109 W. Dr. Martin Luther King Jr. Boulevard, Suite 550

Requester's name and address (optional)

City, state, and ZIP code
Tampa, Florida 33607

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. For individuals, this is your social security number (SSN). **However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3.** For other entities, it is your employer identification number (EIN). If you do not have a number, see **How to get a TIN** on page 3.

Note: *If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.*

Social security number
| | | | | | | | | |

or

Employer identification number
5 9 2 9 7 5 1 6 4

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Gina C. Lenell Date ▶ July 16, 2008

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee.

Note: *If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.*

Foreign person. If you are a foreign person, use the appropriate Form W-8 (see **Pub. 515,** Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement that specifies the following five items:

1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.

2. The treaty article addressing the income.

3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

4. The type and amount of income that qualifies for the exemption from tax.

5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Vendor/Bidder Disclosure

I, Robert B. Greene, PE, PG, CIH, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: GLE Associates, Inc.

Address: 1000 NW 65th Street, Suite 100
Ft. Lauderdale, Florida 33309

FEIN 56-2975164

State and date of incorporation September 12, 1989

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Robert B. Greene, PE, PG, CIH	3109 W. Dr. Martin Luther King, Jr. Blvd. Suite 550 Tampa, FL 33607	100 %
		%
		%
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address

By: _____ Date: July 16, 2008

Signature of Affiant

Robert B. Greene, PE, PG, CIH

Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 16th day of July 2008, by Robert B. Greene, PE, PG, CIH, he/she is personally known to me or has presented _____ as identification.

_____

Notary Public, State of Florida at Large

_____

Print or Stamp of Notary

_____

Serial Number

My Commission Expires: 11/5/08

Ginny C Lemen
My Commission DD355599
Expires November 05, 2008

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Profit Corporation

GLE ASSOCIATES, INC.

Filing Information

Document Number	L15949
FEI Number	592975164
Date Filed	09/12/1989
State	FL
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	06/13/2008
Event Effective Date	NONE

Principal Address

3109 DR. MARTIN LUTHER KING JR BLVD
STE 550
TAMPA FL 33607 US

Changed 05/29/2002

Mailing Address

3109 DR. MARTIN LUTHER KING JR BLVD
STE 550
TAMPA FL 33607 US

Changed 05/29/2002

Registered Agent Name & Address

GREENE, ROBERT B PRES
3109 DR. MARTIN LUTHER KING JR BLVD
STE 550
TAMPA FL 33607 US

Name Changed: 01/19/2004

Address Changed: 01/19/2004

Officer/Director Detail

Name & Address

Title PDTS

GREENE, ROBERT B
3109 MARTIN LUTHER KING JR BLVD, STE 550
TAMPA FL 33607

Title VP

TURNER, R. QUINN
3109 MARTIN LUTHER KING JR BLVD, STE 550
TAMPA FL 33607

Title VP

VAUGHN, STEVEN
3109 MARTIN LUTHER KING JR BLVD, STE 550
TAMPA FL 33607

Annual Reports

Report Year	Filed Date
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2007	02/07/2007
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Document Images

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01/08/2008 -- ANNUAL REPORT	View image in PDF format
02/07/2007 -- ANNUAL REPORT	View image in PDF format
02/08/2006 -- ANNUAL REPORT	View image in PDF format
03/07/2005 -- ANNUAL REPORT	View image in PDF format
01/19/2004 -- ANNUAL REPORT	View image in PDF format
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07/09/2002 -- Amendment	View image in PDF format
05/29/2002 -- ANNUAL REPORT	View image in PDF format
04/23/2001 -- ANNUAL REPORT	View image in PDF format
10/25/2000 -- Amendment	View image in PDF format
05/11/2000 -- ANNUAL REPORT	View image in PDF format
08/06/1999 -- Amendment	View image in PDF format
02/20/1999 -- ANNUAL REPORT	View image in PDF format
05/05/1998 -- ANNUAL REPORT	View image in PDF format
05/13/1997 -- ANNUAL REPORT	View image in PDF format
05/01/1996 -- ANNUAL REPORT	View image in PDF format
05/01/1995 -- ANNUAL REPORT	View image in PDF format

Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type See **Specific Instructions** on page 2.

Name (as shown on your income tax return)
A.D.A. Engineering, Inc.

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☑ Corporation ☐ Partnership ☐ Other ▶ ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
8550 NW 33rd Street, Suite 101

Requester's name and address (optional)

City, state, and ZIP code
Doral, Florida 33122

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
| | | – | | – | | | | |

or

Employer identification number
5 9 – 2 0 6 4 4 9 8

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Juette O. Ayuden Date ▶ 7-17-2008

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

I, Ivette O. Argudin, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: A.D.A. Engineering, Inc.

Address: 8550 NW 33rd Street, Suite 101

FEIN 59-2064498

State and date of incorporation Florida / February 1981

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Ivette O. Argudin	8550 NW 33rd Street, Suite 101, Doral, Florida 33122	51 %
Alberto D. Argudin, PE, CGC	8550 NW 33rd Street, Suite 101, Doral, Florida 33122	49 %
		%
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
N/A	

By: Ivette O. Argudin
Signature of Affiant

Date: July 16, 2008

Ivette O. Argudin
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 16th day of July 2008, by Ivette O. Argudin, he/she is personally known to me or has presented _____ as identification.

Annette Cabrera
Notary Public, State of Florida at Large

Print or Stamp of Notary

ANNETTE M. CABRERA
MY COMMISSION # DD 681008
EXPIRES: August 11, 2011
Bonded Thru Notary Public Underwriters

Serial Number

My Commission Expires: 8/11/11

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Florida Profit Corporation

A.D.A. ENGINEERING, INC.

Filing Information

Document Number	F23071
FEI Number	592064498
Date Filed	02/17/1981
State	FL
Status	ACTIVE

Principal Address

8550 NW 33 ST
SUITE 101
DORAL FL 33122 US

Changed 03/18/2008

Mailing Address

8550 NW 33 ST
SUITE 101
DORAL FL 33122 US

Changed 03/18/2008

Registered Agent Name & Address

ARGUDIN, IVETTE O.
8550 NW 33 ST
SUITE 101
DORAL FL 33122 US

Name Changed: 05/14/1985

Address Changed: 03/18/2008

Officer/Director Detail

Name & Address

Title DS

ARGUDIN, IVETTE O
13841 SW 36TH ST

MIAMI FL 33175

Title DP

ARGUDIN, ALBERTO D
13841 SW 36TH ST
MIAMI FL 33175

Annual Reports

Report Year	Filed Date
2006	01/31/2006
2007	02/08/2007
2008	03/18/2008

Document Images

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Note: This is not official record. See documents if question or conflict.

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Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
R. J. Behar & Company, Inc.

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☑ Corporation ☐ Partnership ☐ Other ▶ ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
6861 SW 196th Avenue, Suite 302

Requester's name and address (optional)

City, state, and ZIP code
Pembroke Pines, Florida 33332

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
| | | | | | | | | |

or

Employer identification number
6 5 - 0 9 5 4 0 7 0

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Date ▶ July 17, 2008

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Vendor/Bidder Disclosure

I, Robert J. Behar, PE, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: R. J. BEHAR & COMPANY, INC.

Address: 6861 SW 196th Avenue, Suite 302
Pembroke Pines, Florida 33332

FEIN 65-0954070

State and date of incorporation Florida / October 4, 1999

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Robert J. Behar, PE President / CEO	6861 SW 196 Ave. Pembroke Pines, FL 33332	75 %
Juan H. Vazquez, PE, PH, BCEE Vice President	6861 SW 196 Ave. Pembroke Pines, FL 33332	25 %
Dereth Behar Corporate Secretary	6861 SW 196 Ave. Pembroke Pines, FL 33332	0 %
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
N / A	

By: _____ Date: July 17, 2008

Signature of Affiant

Robert J. Behar, PE

Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 17 day of July 2008, by Robert J. Behar, PE, he/she is personally known to me or has presented _____ as identification.

_____

Notary Public, State of Florida at Large

LIZANNA KADIR
MY COMMISSION #DD408328
EXPIRES: MAY 13, 2009
Bonded through 1st State Insurance

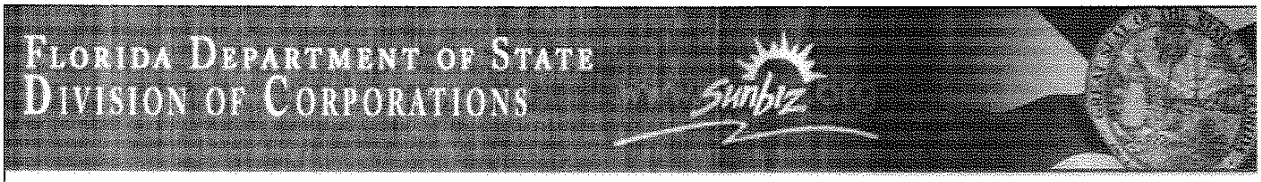
Lizanna Kadir

Print or Stamp of Notary

DD# 408328

Serial Number

My Commission Expires : May 13, 2009



Detail by Entity Name

Florida Profit Corporation

R.J. BEHAR & COMPANY, INC.

Filing Information

Document Number	P99000088184
FEI Number	650954070
Date Filed	10/04/1999
State	FL
Status	ACTIVE

Principal Address

6861 SW 196TH AVENUE
302
PEMBROKE PINES FL 33332

Changed 03/05/2001

Mailing Address

6861 SW 196TH AVENUE
302
PEMBROKE PINES FL 33332

Changed 03/05/2001

Registered Agent Name & Address

KRAKOWER, EVAN R ESQ
10001 W OAKLAND PARK BLVD, STE 202
SUNRISE FL 33351

Officer/Director Detail

Name & Address

Title PVPT

BEHAR, ROBERT J
12090 SW 26TH COURT
DAVIE FL 33330

Title S

BEHAR, DERETH A

12090 SW 26 CT
DAVIE FL 33330

Title VP

VAZQUEZ, JUAN H
3750 SAN SIMEON CIRCLE
WESTON FL 33331

Annual Reports

Report Year	Filed Date
2006	02/28/2006
2007	01/11/2007
2008	01/16/2008

Document Images

01/16/2008 -- ANNUAL REPORT	View image in PDF format
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02/28/2006 -- ANNUAL REPORT	View image in PDF format
02/24/2005 -- ANNUAL REPORT	View image in PDF format
03/15/2004 -- ANNUAL REPORT	View image in PDF format
03/03/2003 -- ANNUAL REPORT	View image in PDF format
03/13/2002 -- ANNUAL REPORT	View image in PDF format
03/05/2001 -- ANNUAL REPORT	View image in PDF format
03/15/2000 -- ANNUAL REPORT	View image in PDF format
10/04/1999 -- Domestic Profit	View image in PDF format

Note: This is not official record. See documents if question or conflict.

Previous on List Next on List Return To List

No Events No Name History

Entity Name

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Form **W-9**
(Rev. November 2005)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
URS Corporation Southern

Business name, if different from above

Check appropriate box: ☐ Individual/ Sole proprietor ☑ Corporation ☐ Partnership ☐ Other ▶ ☐ Exempt from backup withholding

Address (number, street, and apt. or suite no.)
7800 Congress Ave

Requester's name and address (optional)

City, state, and ZIP code
Boca Raton FL 33487

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
| | | | | | | | | |

or

Employer identification number
59-2408789 5

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here Signature of U.S. person ▶ Andrew P. Pheetts Date ▶ 7/17/08

Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

I, Andrew P. Schechter, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: URS Corporation Southern

Address: 7800 Congress Ave
Boca Raton FL 33487

FEIN 59-2087895

State and date of incorporation California 4/9/81

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
URS Holdings, INC	600 Montgomery St San Francisco CA 94111	100 %
		%
		%
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address

By: [illegible] Date: 7/17/08

Signature of Affiant

Andrew P. Schechter, PE

Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 17 day of July 2008, by Andrew P. Schechter, he/she is personally known to me or has presented _____ as identification.

Inge E DeCeglia

Notary Public, State of Florida at Large

Inge E. DeCeglia

Print or Stamp of Notary

DD389367

Serial Number

Notary Public State of Florida
Inge E DeCeglia
My Commission DD389367
Expires 04/10/2009

My Commission Expires: 4-10-09

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Detail by Entity Name

Foreign Profit Corporation

URS CORPORATION

Filing Information

Document Number	833552
FEI Number	941716908
Date Filed	12/29/1974
State	NV
Status	ACTIVE
Last Event	NAME CHANGE AMENDMENT
Event Date Filed	05/26/2000
Event Effective Date	NONE

Principal Address

600 MONTGOMERY ST.
25TH FLR.
SAN FRANCISCO CA 94111 US

Changed 03/01/2004

Mailing Address

600 MONTGOMERY ST.
25TH FLR.
SAN FRANCISCO CA 94111 US

Changed 03/01/2004

Registered Agent Name & Address

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

Name Changed: 12/18/2000

Address Changed: 12/18/2000

Officer/Director Detail

Name & Address

Title DSRV

STEVENSON, WILLIAM A
3950 SPARKS DR SE
GRAND RAPIDS MI 49546

Title SV

BISCHOFF, JOHN A.
1333 BROADWAY, STE. 800
OAKLAND CA 94612

Title V

DOYLE, J R
8181 E. TUFTS AVE
DENVER CO 80237

Title D

ROSENSTEIN, IRWIN L
ONE PENN PLAZA,SUITE 610
NEW YORK NY 10119

Title S

JONES, KRISTIN L
600 MONTGOMERY STREET, 25TH FLOOR
SAN FRANCISCO CA 94111

Annual Reports

Report Year	Filed Date
2006	03/24/2006
2007	02/12/2007
2008	01/16/2008

Document Images

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03/24/2006 -- ANNUAL REPORT	View image in PDF format
02/10/2005 -- ANNUAL REPORT	View image in PDF format
03/01/2004 -- ANNUAL REPORT	View image in PDF format
01/21/2003 -- ANNUAL REPORT	View image in PDF format
02/21/2002 -- ANNUAL REPORT	View image in PDF format
02/01/2001 -- ANNUAL REPORT	View image in PDF format
12/18/2000 -- Reg. Agent Change	View image in PDF format
05/26/2000 -- Name Change	View image in PDF format
02/02/2000 -- ANNUAL REPORT	View image in PDF format
08/02/1999 -- ANNUAL REPORT	View image in PDF format
11/09/1998 -- Name Change	View image in PDF format
06/01/1998 -- Reg. Agent Change	View image in PDF format

03/11/1998 -- ANNUAL REPORT	View image in PDF format
11/21/1997 -- Name Change	View image in PDF format
05/01/1997 -- ANNUAL REPORT	View image in PDF format
03/06/1996 -- ANNUAL REPORT	View image in PDF format
02/27/1995 -- ANNUAL REPORT	View image in PDF format

Note: This is not official record. See documents if question or conflict.

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Events Name History

Entity Name

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Form **W-9**
(Rev. October 2007)
Department of the Treasury
Internal Revenue Service

Request for Taxpayer Identification Number and Certification

Give form to the requester. Do not send to the IRS.

Print or type
See Specific Instructions on page 2.

Name (as shown on your income tax return)
STONER & ASSOCIATES, INC.

Business name, if different from above

Check appropriate box: ☐ Individual/Sole proprietor ☒ Corporation ☐ Partnership
☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ▶
☐ Other (see instructions) ▶

☐ Exempt payee

Address (number, street, and apt. or suite no.)
4341 SW 62nd AVENUE

Requester's name and address (optional)

City, state, and ZIP code
DAVIE, FL 33314

List account number(s) here (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number
| | |

or

Employer identification number
65 | 0078695

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. citizen or other U.S. person (defined below).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. See the instructions on page 4.

Sign Here Signature of U.S. person ▶ James D. Stoner Date ▶ 8/21/08

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Purpose of Form

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),

2. Certify that you are not subject to backup withholding, or

3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

Vendor/Bidder Disclosure

I, James D. Stoner, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: Stoner & Associates, Inc.

Address: 4341 SW 62nd Avenue
Davie, FL 33314

FEIN 65-0078695

State and date of incorporation Florida

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
Stoner & Assocates, Inc.	4341 SW 62nd Ave. Davie, FL 33314	100 %
		%
		%
		%

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address

By: _____ Date: 8/21/08

Signature of Affiant

James D. Stoner

Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 21st day of August 2008, by James D. Stoner, he/she is personally known to me or has presented _____ as identification.

Dawn Sala

Notary Public, State of Florida at Large

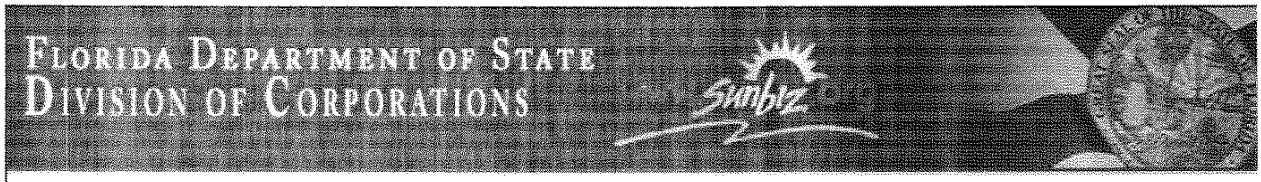
Print or Stamp of Notary

DD361230

Serial Number

My Commission Expires :10/27/08

Dawn Sala
My Commission DD361230
Expires October 27, 2008



Detail by Entity Name

Florida Profit Corporation

STONER & ASSOCIATES, INC.

Filing Information

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FEI Number	650078695
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Principal Address

4341 S.W. 62ND AVE.
DAVIE FL 33314 US

Changed 09/20/2001

Mailing Address

4341 S.W. 62ND AVE.
DAVIE FL 33314 US

Changed 09/20/2001

Registered Agent Name & Address

STONER, JAMES D
637 GRAND RAPIDS BLVD.
NAPLES FL 34120 US

Name Changed: 03/05/1999

Address Changed: 03/06/2007

Officer/Director Detail

Name & Address

Title P

STONER, JAMES D

637 GRAND RAPIDS BLVD.
NAPLES FL 34120

Annual Reports

Report Year	Filed Date
2006	01/06/2006
2007	03/06/2007
2008	01/30/2008

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Events Name History

Entity Name

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