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13 JAN 8 PM 2:48

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>CORPORATION REINSTATEMENT</b>				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT #</b> F05000006308					
1. Corporation Name Western Wood Structures, Inc.					
2. Principal Office Address - No P.O. Box # 20675 SW 105th Ave <small>STATE, APT. #, etc.</small>			3. Mailing Office Address PO Box 130 <small>STATE, APT. #, etc.</small>		
City & State Tualatin, OR			City & State Tualatin, OR		
Zip 97062	Country USA	Zip 97062	Country USA	4. Date Incorporated or Qualified To Do Business in Florida CR28091 (11/10)	
5. FEI Number 93-0575649				Applied For <input type="checkbox"/> Not Applicable	
6. CERTIFICATE OF STATUS DESIRED YES				\$0.75 Additional Fee required for a Certificate of Status	
7. Name and Address of Current Registered Agent					
Name CT Corporation System					
SUN/STATE/FEI (FEI/STATE NUMBER NOT APPLICABLE) 1200 South Pine Island Road					
<small>STATE, APT. #, etc.</small>					
City Plantation,			State FL	Zip Code 33324	
8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0606 or 617.0603, F.S.					
Signature of Registered Agent <i>Hiedi M. Leach</i>		Name Hiedi M. Leach Assistant Secretary		Date 1/7/2013	
REGISTERED AGENT MUST SIGN					
9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)					
Title	Name of Officers and/or Directors	Street Address of Each Officer and/or Director		City / State / Zip	
	SEE ATTACHED				
<b>REINSTATEMENT</b>				JAN 8 2013	
				R. HUNT	
10. E-mail Address: zendra@westernwoodstructures.com <small>(To be used for future annual report notification)</small>					
11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., and that all fees owed by the corporation have been paid. I further certify the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s. 617.156, F.S.					
SIGNATURE: <i>Stephen A. Turner</i>		Name Stephen A. Turner		Date 1/7/13	503/692-6900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

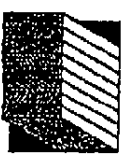
PL810 - 5/11/2012 Update Changes

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TALLAHASSEE, FLORIDA



**WESTERN WOOD  
STRUCTURES, INC.**

20675 S.W. 105th Ave.  
Post Office Box 130  
Tualatin, OR 97062-0130

Telephone: (503) 692-6900  
Fax: (503) 692-6434

wwai@westernwoodstructures.com  
www.westernwoodstructures.com

**Current Officers**

**Stephen A. Turner - President**  
14237 SW McKinley Dr  
Sherwood, OR 97140  
503/925-9955

**Paul C. Gilham - Vice President**  
13670 NW Laidlaw Road  
Portland, OR 97229  
503/645-8293

**Douglas R. Turner - Secretary / Treasurer**  
17375 SW 107<sup>th</sup> St  
Tualatin, OR 97062  
503/691-2510

Florida Department of State  
Division of Corporations  
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CORPORATION REINSTATEMENT  
WESTERN WOOD STRUCTURES, INC.

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R. HUNT

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