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Apr 21, 1999 8:00 am
Secretary of State
04-21-1999 90159 021 ***150.00

PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F98000005889**

1. Corporation Name
LINDAL CEDAR HOMES, INC.

Principal Place of Business	Mailing Address
4300 S. 104TH PL. SEATTLE WA 98178	4300 S. 104TH PL. SEATTLE WA 98178

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 10/22/1998

2. Principal Place of Business (21)

2a. Mailing Address (26)

4. FEI Number: 91-0508250 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. (22) / Suite, Apt. #, etc. (27)

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

City & State (23) / City & State (28)

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip (24) Country (25) / Zip (29) Country (30)

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CCEO	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LINDAL, ROBERT W		1.2 NAME		
STREET ADDRESS	4300 S. 104TH PL.		1.3 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA 98178		1.4 CITY-ST-ZIP		
TITLE	PCOO	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LINDAL, DOUGLAS F		2.2 NAME		
STREET ADDRESS	4300 S. 104TH PL.		2.3 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA 98178		2.4 CITY-ST-ZIP		
TITLE	V	☐ DELETE	3.1 TITLE	V	☒ Change ☐ Addition
NAME	BENDIX, RICHARD C		3.2 NAME	Gregg, Dennis	
STREET ADDRESS	4300 S. 104TH PL.		3.3 STREET ADDRESS	4300 S. 104th Pl.	
CITY-ST-ZIP	SEATTLE WA 98178		3.4 CITY-ST-ZIP	Seattle, WA 98178	
TITLE	V	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	KLINE, GARY D		4.2 NAME		
STREET ADDRESS	4300 S. 104TH PL.		4.3 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA 98178		4.4 CITY-ST-ZIP		
TITLE	VAS	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	LINDAL, MARTIN J		5.2 NAME		
STREET ADDRESS	4300 S. 104TH PL.		5.3 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA 98178		5.4 CITY-ST-ZIP		
TITLE	CES	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	LINDAL, WALTER SIR		6.2 NAME		
STREET ADDRESS	4300 S. 104TH PL.		6.3 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA 98178		6.4 CITY-ST-ZIP		

CR2E034 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED _____ 4/9/99 206-725-0900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Robert W. Lindal