


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # P15792			
1. Entity Name U.S. NATURAL RESOURCES, INC.		Principal Place of Business 8000 N.E. PARKWAY DR, STE 100 VANCOUVER WA 98662	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 8000 N.E. PARKWAY DR, STE 100 VANCOUVER WA 98662-6738 US	
Suite, Apt. #, etc.		Suite, Apt #, etc	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 94-2462111		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL	Zip Code
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____		DATE _____	
<small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>		<small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00		9. Election Campaign Financing \$5.00 May Be	
After May 1, 2007 Fee Will Be \$550.00		Trust Fund Contribution. <input type="checkbox"/> Added to Fees	
Make Check Payable to Florida Department of State.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	CD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WARD, RICHARD H.	NAME	
STREET ADDRESS	8000 NE PKWY DR #100	STREET ADDRESS	
CITY - ST - ZIP	VANCOUVER WA	CITY - ST - ZIP	
TITLE	DVST <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BECHEN, DONALD R.	NAME	
STREET ADDRESS	8000 NE PKWY DR #100	STREET ADDRESS	
CITY - ST - ZIP	VANCOUVER WA	CITY - ST - ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KULBIEDA, GARY M.	NAME	
STREET ADDRESS	212 STATE ST.	STREET ADDRESS	
CITY - ST - ZIP	BELLE VERNON PA	CITY - ST - ZIP	
TITLE	P <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VAN HOOMISSEN, GEORGE	NAME	
STREET ADDRESS	558 ROBINSON ROAD	STREET ADDRESS	
CITY - ST - ZIP	WOODLAND WA 98674	CITY - ST - ZIP	
TITLE	V <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KNERR, MICHAEL P.	NAME	
STREET ADDRESS	558 ROBINSON ROAD	STREET ADDRESS	
CITY - ST - ZIP	WOODLAND WA	CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY - ST - ZIP		CITY - ST - ZIP	



1st MOORE CR2E034 (10/06)

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 05/17/07-80004-004 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Donald R. Bechen* **Donald R. Bechen** **Vice President** 4/20/07 **(360) 892-2450**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #