

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29397

FILED
Jan 18, 2008
Secretary of State

Entity Name: COOK INLET REGION, INC.

Current Principal Place of Business:

CIRI BUILDING, 2525 C STREET
P. O. BOX 93330
ANCHORAGE, AK 995093330

New Principal Place of Business:

Current Mailing Address:

CIRI- ATTN: MICHELE CHRISTIANSEN
P.O. BOX 93330
ANCHORAGE, AK 995093330

New Mailing Address:

FEI Number: 92-0042304 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALTMAN, STUART H
100 SE 2ND ST., #17TH FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: ANDERSON, CHARLES D
Address: 2525 C STREET
City-St-Zip: ANCHORAGE, AK 99503

Title: PCEO () Delete
Name: BROWN, MARGARET L
Address: 2525 C STREET STE 500
City-St-Zip: ANCHORAGE, AK 99503

Title: T () Delete
Name: BOLING, MICHAEL
Address: 2525 C STREET STE 500
City-St-Zip: ANCHORAGE, AK 99503

Title: VP () Delete
Name: SANDERS, KEITH A
Address: 2525 C STREET SUITE 500
City-St-Zip: ANCHORAGE, AK 99503

Title: VP () Delete
Name: MINICH, SOPHIE R
Address: 2525 C STREET STE 500
City-St-Zip: ANCHORAGE, AK 99503

Title: VP () Delete
Name: DONATELLI, BARBARA A
Address: 2525 C STREET STE 500
City-St-Zip: ANCHORAGE, AK 99503

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA A. DONATELLI

VP

01/18/2008

Electronic Signature of Signing Officer or Director

_____ Date