

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P37419

FILED
Jan 18, 2012
Secretary of State

Entity Name: COLSON & COLSON GENERAL CONTRACTOR, INC.

Current Principal Place of Business:

2260 MCGILCHRIST ST SE
SALEM, OR 97302 US

New Principal Place of Business:

Current Mailing Address:

2260 MCGILCHRIST ST SE
SALEM, OR 97302 US

New Mailing Address:

FEI Number: 93-0969479

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: T/D
Name: TIBBOT, GREGORY
Address: 2260 MCGILCHRIST ST SE
City-St-Zip: SALEM, OR 97302

Title: P/D
Name: BRENDEN, NORMAN L.
Address: 9310 NE VANCOUVER MALL DRIVE #200
City-St-Zip: VANCOUVER, WA 98662

Title: D
Name: HASSO, MAY
Address: 1 NAPOLI
City-St-Zip: NEWPORT BEACH, CA 92660

Title: S
Name: WELLS, JUDEE A
Address: 9310 NE VANCOUVER MALL DRIVE #200
City-St-Zip: VANCOUVER, WA 98662

Title: VP/D
Name: COLSON, BRADLEY A
Address: 9310 NE VANCOUVER MALL DRIVE #200
City-St-Zip: VANCOUVER, WA 98662

Title: VP
Name: MULLIGAN, ERIC
Address: 2260 MCGILCHRIST STREET SE
City-St-Zip: SALEM, OR 97302

I hereby 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 all other like empowered.

SIGNATURE: NORMAN L. BRENDEN

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01/18/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date