

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000006308

**FILED**  
**Jan 31, 2021**  
**Secretary of State**  
**2736896958CC**

**Entity Name:** WESTERN WOOD STRUCTURES, INC.

**Current Principal Place of Business:**

20675 SW 105TH AVENUE  
TUALATIN, OR 97062

**Current Mailing Address:**

PO BOX 130  
TUALATIN, OR 97062

**FEI Number:** 93-0575649

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

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

*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

**Officer/Director Detail :**

Title            PRESIDENT  
Name            GILHAM, PAUL CP.E.  
Address        13670 NW LAIDLAW ROAD  
City-State-Zip: PORTLAND OR 97229

Title            VP  
Name            DYER, ROBERT M  
Address        12128 SE NELLA WAY  
City-State-Zip: HAPPY VALLEY OR 97086

Title            TREASURER  
Name            STEIN, JAMES R  
Address        5810 SE MORRIS ST  
City-State-Zip: PORTLAND OR 97206

Title            SECRETARY  
Name            MATTHIAS, BRENTLEY A  
Address        2912 PRINCETON ST  
City-State-Zip: NEWBERG OR 97132

Title            DIRECTOR  
Name            HYLAND, HAZEN A  
Address        10355 SW KIOWA ST  
                  NONE  
City-State-Zip: TUALATIN OR 97062

*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:** PAUL C GILHAM

**PRESIDENT**

**01/31/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date