

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000003909

Entity Name: PERKINS COIE D.C., P.C.**Current Principal Place of Business:**700 THIRTEENTH ST NW SUITE 600
WASHINGTON, DC 20005**Current Mailing Address:**700 THIRTEENTH ST NW SUITE 600
WASHINGTON, DC 20005**FEI Number: 91-1434708****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	CPD
Name	MALLEY, WILLIAM G
Address	700 THIRTEENTH ST NW SUITE 600
City-State-Zip:	WASHINGTON DC 20005

Title	DS
Name	SHARP, BENJAMIN S
Address	700 THIRTEENTH ST NW SUITE 600
City-State-Zip:	WASHINGTON DC 20005

Title	D, VP
Name	BLOODWORTH, SHANNON M
Address	700 THIRTEENTH ST NW SUITE 600
City-State-Zip:	WASHINGTON DC 20005

Title	D VP
Name	BAUR, DONALD C
Address	700 THIRTEENTH ST NW SUITE 600
City-State-Zip:	WASHINGTON DC 20005

Title	DT
Name	DEVANEY, JOHN M
Address	700 THIRTEENTH ST NW SUITE 600
City-State-Zip:	WASHINGTON DC 20005

Title	D, VP
Name	BOOTH, PAUL M
Address	700 THIRTEENTH ST NW SUITE 600
City-State-Zip:	WASHINGTON DC 20005

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: WILLIAM G MALLEY**CPD****02/01/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date