2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT #854070** 05-04-2004 90172 001 ***150 00 EVERGREEN INTERNATIONAL AIRLINES, INC. Principal Place of Business Mailing Address 14020550 3850 THREE MILE LANE 3850 THREE MILE LANE ATTN: TAX DEPT ATTN: TAX DEPT MCMINNVILLE, OR 97128 MCMINNVILLE, OR 97128 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04272004 Chg-P CR2E034 (10/03) City & State 4. FEI Number Applied For City & State 81-0357870 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6.-Name and Address of Current Registered Agent -7.-Name and Address of New Registered Agent-Name CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Delete CONNOLLY, ED 3850 THREE MILE LAWIE ☐ Change Addition NAME SMITH, DELFORD M NAME STREET ADDRESS 3850 THREE MILE LANE STREET ADDRESS MCMINNVILLE, DE 97128 CITY-ST-ZIP MCMINNVILLE, OR CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME BAUCKHAM, ANTHONY E NAME STREET ADDRESS 3850 THREE MILE LANE STREET ADDRESS CITY-ST-ZIP MCMINNVILLE, OR 97128 CITY-ST-ZIP -TITLE ☐ Delete TITLE Change — ☐ Addition WOOTRESS, GWENNA R NAME NAME STREET ADDRESS 3850 THREE MILE LANE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MCMINNVILLE, OR 97128 VIDIT JOHN A. TITLE VFD TITLE □ Delete Change, ☐ Addition NAME IRWIN, JOHN A NAME STREET ADDRESS 3850 THREE MILE LANE STREET ADDRESS CITY-ST-ZIP MCMINNVILLE OR 97128 CITY-ST-7IP DILE TITLE ∠ Change ☐ Delete ☐ Addition WAHLBERG, TIMOTHY G. NAME WAHLBERG, TIMOTHY G NAME 3850 THREE MILE LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MCMINNVILLE, OR 97128 CITY-ST-ZIP TITLE Delete MILE ☐ Change ☐ Addition WAHLBERT, TIMOTHY A NAME NAME 3850 THREE MILE LANE STREET ADDRESS STREET ADDRESS MCMINNVILLE, OR 97128 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

TURE AND TYPED OR PRINTED NAME OF SIGNING OF FICER OR DIRECTO

GIVENNA R. WOOTHESS

412-4361 x476

FILED May 04, 2004 8:00 am