FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAR 23 AM 10:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 854385 (2)

1. Corporation Name
SPIDER STAGING CORPORATION

Principal Place of Business	Mailing Address
23500 - 64TH AVE., S. KENT WA 98032 US Attn: Legal Dept.	23500-64TH AVENUE SOUTH KENT WA 98032 US Attn: Legal Dept.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/14/1982
3a. Date of Last Report: 08/08/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
4. FEI Number: 91-1334832 ☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. (22) (27)
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
City & State (23) (28)
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
Zip (24) Country (25) Zip (29) Country (30)
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

REDMAN, GLENN D.
716-A INDUSTRY RD
LONGWOOD FL 32750

10. Name and Address of New Registered Agent

81 Name: Bob Carter
82 Street Address (P.O. Box Number is Not Acceptable): 225 Pineda St., #159
83
84 City: Longwood, FL 85 Zip Code: 32750

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: William R Carter Jr
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND [illegible]	N 12
TITLE	PCEO and Director	1.1 TITLE	☐ Change ☐ Addition
NAME	TARRANT, RONALD W	1.2 NAME	
STREET ADDRESS	23500 - 64TH AVENUE SOUTH	1.3 STREET ADDRESS	
CITY-ST-ZIP	KENT WA 98032	1.4 CITY-ST-ZIP	
TITLE	VPFD	2.1 TITLE	☐ Change ☐ Addition
NAME	CROSS, THOMAS A	2.2 NAME	
STREET ADDRESS	23500 - 64TH AENUE SOUTH	2.3 STREET ADDRESS	
CITY-ST-ZIP	KENT WA 98032	2.4 CITY-ST-ZIP	
TITLE	VP	3.1 TITLE	☐ Change ☐ Addition
NAME	LEVY, JEFFRY A.	3.2 NAME	
STREET ADDRESS	23500 - 64TH AVENUE SOUTH	3.3 STREET ADDRESS	
CITY-ST-ZIP	KENT WA 98032	3.4 CITY-ST-ZIP	
TITLE	GCSD	4.1 TITLE	☐ Change ☐ Addition
NAME	LENESS, JOHN S	4.2 NAME	
STREET ADDRESS	23500- 64TH AVENUE SOUTH	4.3 STREET ADDRESS	
CITY-ST-ZIP	KENT WA 98032	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: JLS, Jr. 1/30/95 (206) 850-3500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
John S. Leness, Corporate Secretary

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