FILI	E NOW: FILING FEE A	AFTER MAY 1S	T IS \$550.00	TII	ED
COF	PROFIT RPORATION UAL REPORT	FLORIDA DE Sanda	PARTMENT OF STATE a B. Mortham retary of State	FIL Jan 29 199	98 8:00am
	1998	DIVISION (OF CORPORATIONS	Secretary	y of State
 Corporation 		5 (2)		Secretary	y of State
SPIDE	R STAGING CORPORATION				
Principal Place of Business Mailing Address 23500 - 64TH AVE S. 23500-64TH AVENUE SOL KENT WA 99032 ATTN: LEGAL DEPT.			SOUTH	* 100 au 101 au 1224 140 au 1410 1616 au 141	ITATI KILEIK OEBAT BIBIT GIBUT BIBIH 1981
US KENT WA 99032				DO NOT WRITE II	V THIS SPACE
O District F	Place of Business	US		3. Date Incorporated or Qualified 10/14/1982	
21 Principal 2	race of Busiliess	2a. Mailing Address		4. FEI Number 91-1334832	Applied For Not Applicable
Suite. Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional Fee Required
City & Stat		City & State		Trace Land Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid Personal Property Tax due June 3	0. ☐ Yes ☐ No
	9. Name and Address of Current PROPATION SERVICE COMPANY		81 Name	10. Name and Address of New Regi	stered Agent
	01 HAYS STREET	•			·
	LLAHASSEE FL 32301		82 Street Ac	dress (P.O. Box Number is Not Acceptable	}
			83		
			84 City		85 Zip Code
11. Pursuant office or r agent, I a	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 607.1508, Florida Sta of Florida. Such change wattions of, Section 607.0505.	atutes, the above-named co as authorized by the corpor Florida Statutes.	orporation submits this statement for the pur ration's board of directors. I hereby accept	pose of changing its registered the appointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered ager OFFICERS AND		NOTE. Registered Agent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
TITLE	PD	DELETE			
NAME	TARRANT, RONALD W			Executive VP/COO R. B. ("Brad") Lawr	
STREET ADDRESS	23500 - 64TH AVENUE SOUT	Н		23500 64th Avenue S	
CITY-ST-ZIP TITLE	KENT WA 98032 VD	▼ DELETE		Kent, Washington 9	8032 Change Addition
NAME	CROSS, THOMAS A	Defere	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS	23500 - 64TH AENUE SOUTH		2.3 STREET ADDRESS		
CITY-ST-ZIP	KENT WA 98032		2. 4 CITY - ST-ZIP		
TITLE	VP	DELETE	3.1 TITLE		Change Addition
NAME	LEVY, JEFFRY A.	J	3.2 NAME		
STREET ADDRESS	23500 - 64TH AVENUE SOUTI KENT WA 98032	1	3.3 STREET ADDRESS		
CłTY - ST - ZIP TłTLE	GCSD	DELETE	3.4. GITY-ST-ZIP 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	CFO REICHENBACH, STEPHEN P	☐ DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS	23500 64TH SO		5.2 NAME 5.3 STREET ADDRESS		
CITY-ST-ZIP	KENT WA 98032		5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

14. 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 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:

| 14. | 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 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.

NAME

STREET ADDRESS