

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000002823

FILED
May 20, 2002 8:00 AM
Secretary of State

Entity Name: OREGON BREWING COMPANY, INC.

Current Principal Place of Business:

2320 OSU DR.
NEWPORT, OR 97365

New Principal Place of Business:

Current Mailing Address:

2320 OSU DR.
NEWPORT, OR 97365

New Mailing Address:

FEI Number: 93-0996650

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCARTHY, IAN
1368 SPAULDING RD, UNIT D
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JOYCE, JACK L
Address: 2320 OSU DR.
City-St-Zip: NEWPORT, OR

Title: S () Delete
Name: MAIER, JOHN
Address: 2320 OSU DR.
City-St-Zip: NEWPORT, OR

Title: TD () Delete
Name: SCHULTZ, JEFFRY D
Address: 9700 SW CAPITAL HWY
City-St-Zip: PORTLAND, OR

Title: D () Delete
Name: LAVARIS, TOM
Address: 325 118TH AVE SE STE 106
City-St-Zip: BELLEVUE, WA

Title: D () Delete
Name: MOORE, PETER
Address: 216 NW 15TH
City-St-Zip: PORTLAND, OR

Title: D () Delete
Name: ROSENFELD, WARREN
Address: 2495 NW NICOLAI ST.
City-St-Zip: PORTLAND, OR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JACK L. JOYCE

PD

05/20/2002

Electronic Signature of Signing Officer or Director

Date