

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2004 08:00 AM
Secretary of State

DOCUMENT # F03000000327

1. Entity Name
SENETET, INC.



Principal Place of Business

3723 FAIRVIEW INDUSTRIAL DR. SE, STE. 270
SALEM, OR 97302

Mailing Address

PO BOX 3006
SALEM, OR 97302-0006



04262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
81-0566112

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
526 E. PARK AVENUE
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

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

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	HARDER, JON M
STREET ADDRESS	3723 FAIRVIEW INDUSTRIAL DR. SE, STE. 270
CITY-ST-ZIP	SALEM, OR 97302
TITLE	VC
NAME	FISHER, DARRYL E
STREET ADDRESS	3723 FAIRVIEW INDUSTRIAL DR. SE, STE. 270
CITY-ST-ZIP	SALEM, OR 97302
TITLE	DVTS
NAME	GUTZLER, J. WALLACE
STREET ADDRESS	3723 FAIRVIEW INDUSTRIAL DR. SE, STE. 270
CITY-ST-ZIP	SALEM, OR 97302
TITLE	D
NAME	JACOBSEN, ERIC W
STREET ADDRESS	01350 SW RADCLIFF ROAD
CITY-ST-ZIP	PORTLAND, OR 97219
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

04262004
81-0566112-024 150.00

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

J. Wallace Gutzler

4/27/04

(503) 375-9016

Date

Daytime Phone #