

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003293

Entity Name: KPFF, INC.

FILED
Mar 09, 2009
Secretary of State

Current Principal Place of Business:

1601 FIFTH AVENUE, SUITE 1600
SEATTLE, WA 98101

New Principal Place of Business:

Current Mailing Address:

1601 FIFTH AVENUE, SUITE 1600
SEATTLE, WA 98101

New Mailing Address:

FEI Number: 91-0755897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: ASHER, JEFFERSON
Address: 6080 CENTER DRIVE, SUITE 300
City-St-Zip: LOS ANGELES, CA 90045

Title: VT () Delete
Name: DILL, STEVE
Address: 1601 FIFTH AVENUE, SUITE 1600
City-St-Zip: SEATTLE, WA 98101

Title: VS () Delete
Name: WATSON, WADE
Address: 101 STEWART STREET, SUITE 800
City-St-Zip: SEATTLE, WA 98101

Title: V () Delete
Name: IBOSHI, RALPH
Address: 1601 FIFTH AVENUE, SUITE 1600
City-St-Zip: SEATTLE, WA 98101

Title: D () Delete
Name: GAVAN, JOHN
Address: 6080 CENTER DR STE 300
City-St-Zip: LOS ANGELES, CA 90045

Title: D () Delete
Name: GAAFAR, GAAFAR
Address: 111 SW 5TH AVE SUITE 2500
City-St-Zip: PORTLAND, OR 97204

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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Title: () Change () Addition
Name:
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 exemption stated in Chapter 119, 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: STEVE DILL

VT

03/09/2009

Electronic Signature of Signing Officer or Director

Date