

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004891

FILED
Mar 19, 2008
Secretary of State

Entity Name: PACIFIC CONSTRUCTION MANAGEMENT, INC.

Current Principal Place of Business:

4000 KRUSE WAY PL
BUILDING 3, SUITE 120
LAKE OSWEGO, OR 97035

New Principal Place of Business:

Current Mailing Address:

4000 KRUSE WAY PL
BUILDING 3, SUITE 120
LAKE OSWEGO, OR 97035

New Mailing Address:

FEI Number: 91-2178570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGSTROM, SHERYL L
2702 BARROW DR
MERRITT ISLAND, FL 32952 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: CP () Delete
Name: PERSINGER, LAURENCE T
Address: 17225 KELOK ROAD
City-St-Zip: LAKE OSWEGO, OR 97034

Title: ST () Delete
Name: PERSINGER, CAROL L
Address: 17225 KELOK RD.
City-St-Zip: LAKE OSWEGO, OR 97034

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: CAROL L PERSINGER

ST

03/19/2008

Electronic Signature of Signing Officer or Director

_____ Date