

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000001683

FILED
Apr 26, 2007
Secretary of State

Entity Name: NORTH CASCADE INDUSTRIAL CO.

Current Principal Place of Business:

410 11TH AVENUE SE STE 202
OLYPIA, WA 98501

New Principal Place of Business:

95007 BUCKEYE CT.
FERNANDINA BEACH, FL 32034 US

Current Mailing Address:

PO BOX 8372
AMELIA ISLAND, FL 32035

New Mailing Address:

P.O. BOX 8372
AMELIA ISLAND, FL 32035 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
1203 GOVERNOR'S SQUARE BLVD
SUITE 101
TALLAHASSEE, FL 323012960 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: DPS () Delete
Name: WEISS, BRAD
Address: PO BOX 8372
City-St-Zip: AMELIA ISLAND, FL 32035

Title: VPT () Delete
Name: WEISS, TAWNIA
Address: PO BOX 8372
City-St-Zip: AMELIA ISLAND, FL 32035

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WEISS, BRAD
Address: P.O. BOX 8372
City-St-Zip: AMELIA ISLAND, FL 32035

Title: S (X) Change () Addition
Name: WEISS, BRAD
Address: P.O. BOX 8372
City-St-Zip: AMELIA ISLAND, FL 32035

Title: D () Change (X) Addition
Name: WEISS, BRAD
Address: P.O. BOX 8372
City-St-Zip: AMELIA ISLAND, FL 32035

Title: V () Change (X) Addition
Name: WEISS, TAWNIA
Address: P.O. BOX 8372
City-St-Zip: AMELIA ISLAND, FL 32035

Title: T () Change (X) Addition
Name: WEISS, TAWNIA
Address: P.O. BOX 8372
City-St-Zip: AMELIA ISLAND, FL 32035

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: CHARLES BRADFORD WEISS

P

04/26/2007

Electronic Signature of Signing Officer or Director

Date