

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004607

FILED
Apr 13, 2009
Secretary of State

Entity Name: MAGNUSSON KLEMENCIC ASSOCIATES, INC.

Current Principal Place of Business:

1301 FIFTH AVENUE
SUITE 3200
SEATTLE, WA 981012699

New Principal Place of Business:

Current Mailing Address:

1301 FIFTH AVENUE
SUITE 3200
SEATTLE, WA 981012699

New Mailing Address:

FEI Number: 91-0861758

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: CHRM () Delete
Name: MAGNUSSON, JON D
Address: 517 WEST HIGHLAND DRIVE
City-St-Zip: SEATTLE, WA 981012699

Title: P () Delete
Name: KLEMENCIC, RON
Address: 5620-55TH AVENUE NE
City-St-Zip: SEATTLE, WA 98105

Title: S () Delete
Name: MCINTYRE, BRIAN J
Address: 18609 - 15TH NORTHWEST
City-St-Zip: SHORELINE, WA 98177

Title: T () Delete
Name: CHRISTOPHER, WILLIAM R
Address: 16224 - 205TH PLACE SE
City-St-Zip: RENTON, WA 98059

Title: V () Delete
Name: ANDERSON, ROBERT D
Address: 34712 PILOT POINT ROAD NE
City-St-Zip: KINGSTON, WA 98346

Title: V () Delete
Name: BRIGGS, GREG
Address: 7323 JONES AVENUE NW
City-St-Zip: SEATTLE, WA 98117

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:

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

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: WILLIAM CHRISTOPHER

CFO

04/13/2009

Electronic Signature of Signing Officer or Director

Date