

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Feb 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F93000000494 (5)

1. Corporation Name
SEATTLE SECURITY PROPERTIES INC.

Principal Place of Business 1201 3RD AVE SUITE 5400 SEATTLE WA 98101 US	Mailing Address 1201 3RD AVE SUITE 5400 SEATTLE WA 98101-3031 US
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 02/04/1993	3a. Date of Last Report 02/07/1996
		4. FEI Number 91-1266120	Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent NRAI SERVICES, INC. 526 EAST PARK AVENUE TALLAHASSEE FL 32301	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____
Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C <input type="checkbox"/> DELETE	1.1 TITLE	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PFLEGER, PAUL H	1.2 NAME	Paul F. Muttu
STREET ADDRESS	1201 3RD AVE, STE5400	1.3 STREET ADDRESS	1201 3rd Ave. Ste 5400
CITY-ST-ZIP	SEATTLE WA	1.4 CITY-ST-ZIP	Seattle WA 98101
TITLE	P <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CURRAN, THOMAS C	2.2 NAME	
STREET ADDRESS	1201 3RD AVE, STE5400	2.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	2.4 CITY-ST-ZIP	
TITLE	V <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OREHEK, JOHN M	3.2 NAME	
STREET ADDRESS	1201 3RD AVE, STE 5400	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	3.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	4.1 TITLE	Executive VP & Asst. Sec. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FULBRIGHT, MICHAEL G.	4.2 NAME	Fulbright, Michael G.
STREET ADDRESS	1201 3RD AVE, STE 5400	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	4.4 CITY-ST-ZIP	
TITLE	AS <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, BRANDY A	5.2 NAME	
STREET ADDRESS	1201 3RD AVE, STE 5400	5.3 STREET ADDRESS	
CITY-ST-ZIP	SEATTLE WA	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Paul F. Muttu **Paul F. Muttu** 1/29/97 206-622-9900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)