

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 19, 2000 8:00 am**  
**Secretary of State**

05-19-2000 90025 049 \*\*\*150.00

84515



DO NOT WRITE IN THIS SPACE

**DOCUMENT # F93000005564**

1. Entity Name

**TIMBERLINE SOFTWARE CORPORATION**

Principal Place of Business

Mailing Address

15195 NW GREENBRIER PKWY  
 BEAVERTON OR 97006  
 US

15195 NW GREENBRIER PKWY  
 BEAVERTON OR 97006-5701  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**93-0748489**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM**  
**1200 S. PINE ISLAND RD.**  
**PLANTATION FL 33324**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

*[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
 Tax filing requirement and elects to do so.  
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	V	<input type="checkbox"/> Delete
NAME	DENNIS STEJSKAL	
STREET ADDRESS	15195 NW GREENBRIER PKWY	
CITY-ST-ZIP	BEAVERTON OR 97006-5701	
TITLE	C	<input type="checkbox"/> Delete
NAME	JAMES A. MEYER	
STREET ADDRESS	1331 SW BROADWAY SUITE 201	
CITY-ST-ZIP	PORTLAND OR	
TITLE	D	<input type="checkbox"/> Delete
NAME	DONALD L. TISDEL	
STREET ADDRESS	1691 VILLAGE PARK LANE	
CITY-ST-ZIP	LAKE OSWEGO OR	
TITLE	V	<input type="checkbox"/> Delete
NAME	JOHNSTON, NICOLLETTE D.	
STREET ADDRESS	15195 NW GREENBRIER PKWY	
CITY-ST-ZIP	BEAVERTON OR 97006-5701	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	MEEK, JOHN M.	
STREET ADDRESS	9600 SW NIMBUS AVE	
CITY-ST-ZIP	BEAVERTON OR	
TITLE	PD	<input type="checkbox"/> Delete
NAME	PELTZ, CURTIS L.	
STREET ADDRESS	15195 NW GREENBRIER PKWY	
CITY-ST-ZIP	BEAVERTON OR 97006-5701	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	COX, THOMAS P.	
STREET ADDRESS	5245 SW SANTA MONICA CT.	
CITY-ST-ZIP	PORTLAND, OR 97221	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*

CARL ASAI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/00

Date

503 439-5208

Daytime Phone #

CR2E034 (9/99)

#F9300005564  
845151

TIMBERLINE SOFTWARE CORPORATION 93-0748489  
FLORIDA 1999 CORPORATION ANNUAL REPORT  
SCHEDULE FOR ITEM 12: ADDITIONAL OFFICERS NOT LISTED ON ITEM 12

TITLE	NAME	ADDRESS
V/T/S	Carl C. Asai	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701
V	James O. Campbell	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701
V	John M. Geffel	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701
V	Matthew S. Lange	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701
V	Carol A. Vega	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701
V	Thomas W. Coleman	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701
V	Ann C. Kenkel	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701
V	Stephen D. Watt	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701
V	Neil S. Hannah	15195 N.W. Greenbrier Parkway Beaverton, OR 97006-5701