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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400003648 (2)

THE WADDELL ORGANIZATION, INC.

FILED
May 04 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address					r indital ting then diam anni datin dain bann daisa inna gun dillat ibin 1641					
1580 VALLEY RIVER DR P.O. BOX 7946 STE 210 EUGENE OR 97401 EUGENE OR 97401				DO NOT WRITE IN THIS SPACE						
US					3. Date Incorporated or Qualified 07/13/1994					
2. Principal Place of Business	2a, Mailing Address				4.	FEI Number	L	Applied For		
21 44 West Broadway	26				<u></u>	93-1079596	L	Not Applicable		
Suite, Apt. #, etc. 0	Suite, Apt. #, etc.			5.	Certificate of Status Desired		75 Additional se Required			
City & State 23 EUGENE OR	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip Country 25 USA	Zip 29	—¬ `			8. This corporation owes or has paid the current year Intanafible Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent						
CT CORPORATION SYSTEM			81	Name						
1200 <b>So</b> uth Pine Island Road Plantation FL 33324			82	Street Address (P.O. Box Number is Not Acceptable)						
		[	83							
			84	City		FL	85	Zip Code		

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

Storagure, based or graded date of registered agent and title if applicable. (NOTE Registered Agent signature registered within coinstaints)

DATE

SIGNATURE	Signature, typical or printed name of registered against and little if apple	atale (NOTE 6	legisterud Agent signature	required whim reinstating)	DATE		
12.	OF LICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12			
TITLE	CP .	DELETE	1.1 TITLE		Change	Addition	
NAME	<b>WADDELL</b> , DONALD A		1.2 NAME	]			
STREET ADDRESS	1580 VALLEY RIVER DR, STE 260		1.3 STREET ADDRESS	44 West Broadway, Ste	502		
CITY-ST-ZIP	Eugene or		1.4 City-St-ZiP				
TITLE	\$	DELFTE	2.1 TITLE		Change	Addition	
NAME	WHEELER, MYRNA K		22 NAME				
STREET ADDRESS	1580 VALLEY RIVER DR, STE 260		2.3 STREET ADDRESS	44 West Broadway, Ste	502		
CITY-ST-ZIP	EUGENE OR	'	2. 4 CITY - ST - ZIP			)	
TITLE	V	DELE1E	3.1 TITLE		Change	Addition	
NAME	LUND, CHRISTINA M		3.2 NAME		C03		
STREET ADDRESS	1580 VALLEY RIVER DR, STE 210		3.3 STREET ADDRESS	44 West Broadway, Ste	302		
CITY-ST-ZIP	EUGENE OR		3.4 CITY-ST-ZIP				
TITLE	<u>CP</u>	DELETE	4.1 TITLE		☐ Change	Addition	
NAME )	WADELL, DONALD	,	4. 2 NAME			1	
STREET ADDRESS	1680 VALLEY RIVER DR, STE 210		4.3 STREET ADDRESS				
CITY-ST-ZIP	EUGENE OR		4.4 CITY - ST - ZIP			Ì	
TITLE	\$	DELETE	5.1 TITLE		Change	Addition	
NAME	WHEELER, MYRNA		5.2 NAME				
STREET ADDRESS	1580 VALLEY RIVER DR, STE 210		5.3 STREET ADDRESS				
CITY-ST-ZIP	EUGENE OR		5.4 CITY - ST - ZIP			1	
TITLE		DELETE	6.1 TITLE		Change	Addition	
NAME			6.2 NAME			· ·	
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP			6.4 CITY - ST - ZIP	·			

14. 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 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 13 if changed, or on an attachment with an address.

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