

Document Number Only  
**F9500000 1226**

**C T CORPORATION SYSTEM**  
 Requester's Name  
 1311 Executive Center Drive, Ste. 200  
 Address  
 Tallahassee, Fla. 32301 (904) 656-0290  
 City State Zip Phone

ALL INFORMATION CONTAINED  
 HEREIN IS UNCLASSIFIED  
 DATE 03/01/01 BY 60322 UCBAW

**CORPORATION(S) NAME**

*NEI Corp of Delaware*

- |   |   |  |
|---|---|--|
| <input checked="" type="checkbox"/> Profit    | <input type="checkbox"/> Amendment              | <input type="checkbox"/> Merger                |
| <input checked="" type="checkbox"/> NonProfit | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark                  |
| <input checked="" type="checkbox"/> Foreign   | <input type="checkbox"/> Annual Report          | <input type="checkbox"/> Other                 |
| <input type="checkbox"/> Limited Partnership  | <input type="checkbox"/> Reservation            | <input type="checkbox"/> Change of N.A.        |
| <input type="checkbox"/> Reinstatement        | <input type="checkbox"/> Photo Copies           | <input type="checkbox"/> Fictitious Name       |
| <input type="checkbox"/> Certified Copy       | <input type="checkbox"/> Call When Ready        | <input type="checkbox"/> CUB / O/B             |
| <input type="checkbox"/> Call When Ready      | <input type="checkbox"/> Walk In                | <input type="checkbox"/> Call if Problem       |
| <input checked="" type="checkbox"/> Walk In   | <input type="checkbox"/> Mail Out               | <input type="checkbox"/> Will Wait             |
| <input type="checkbox"/> Mail Out             |   | <input checked="" type="checkbox"/> After 4:30 |
|   |   | <input type="checkbox"/> Pick Up               |

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 FBI - TAMPA

**APPLICATION BY FOREIGN CORPORATION FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. NCI Corp. of Delaware  
(Name of corporation: must include the word "INCORPORATED," "COMPANY," or "CORPORATION" or words or abbreviations of like import in language, as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware  
(State or country under the law of which it is incorporated)

3. February 22, 1995 4. Perpetual  
(Date of Incorporation) (Duration)

5. 91-1672879  
(Federal Employer Identification number, if applicable)

6. Upon Qualification  
(Date first transacted business in Florida. See sections 607.1501, 607.1502, and 817.155, F.S.)

7. 1148 Broadway Plaza, Tacoma, Washington 98402  
(Current mailing address)

To engage in any lawful act or activity for which corporations may be  
8. organized under the State law.  
(Brief description of the nature of the business in which it is engaged in the state of Florida)

9. Names and street addresses of officers and or directors:

**A. Directors:**

Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: See attached list of directors

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

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SECRETARY OF STATE  
FEB 22 1995 11:47 AM

**II. Officers:**

President See attached list of officers

Address \_\_\_\_\_  
\_\_\_\_\_

Vice President \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

(If needed, you may attach an addendum to the application listing additional officers and/or directors.)

**10. Name and Street address of Florida registered agent:**

Name: C T Corporation System

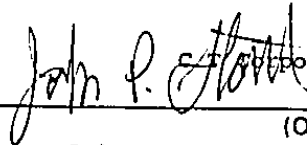
Office Address: c/o C T Corporation System, 1200 South Pine Island Road  
Plantation, Florida 33324

Zip Code

**11. Registered agent's acceptance:**

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered agent's signature: \_\_\_\_\_



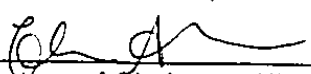
\_\_\_\_\_  
C T Corporation System

(Officer)

John P. Stout, Asst. Secy.

(Typed Name and Title of Officer)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

13.   
\_\_\_\_\_  
(Signature of Chairman, Vice Chairman, or any officer listed in number 9 of the application)

14. Ellen B. Alben, Assistant Secretary  
\_\_\_\_\_  
(Name and capacity of person signing application)

**OFFICERS AND DIRECTORS**

**Directors:**

**Chairman:** Chris Marker  
1148 Broadway Plaza  
Tacoma, Washington 98402

Robert F. Pacquer  
1148 Broadway Plaza  
Tacoma, Washington 98402

Richard P. Adcock  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Officers:**

**President**

Chris Marker  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Executive Vice President**

Jeffrey M. McKain  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Senior Vice President and  
Chief Financial Officer**

Robert F. Pacquer  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Senior Vice President and  
Secretary**

Richard P. Adcock  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Senior Vice President/Human  
Resources and Support  
Services**

Kris H. Scoumperdis  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Vice President and Treasurer**

Robert K. Schneider  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Vice President/Finance and  
Principal Accounting Officer**

Michael B. Weitz  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Assistant Secretary**

Ellen B. Alben  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Assistant Secretary**

Brian J. Rodan  
1148 Broadway Plaza  
Tacoma, Washington 98402

**Assistant Treasurer**

Lori J. Segale  
1148 Broadway Plaza  
Tacoma, Washington 98402

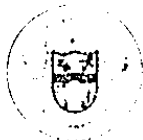
SECRET  
CONFIDENTIAL  
SEP 14 1997

State of Delaware  
Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NCI CORP. OF DELAWARE" IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTH DAY OF MARCH, A.D. 1995.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

SECRETARY OF STATE  
03 MAR 14 PM 1:47



*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION

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DATE

03-08-95

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FILED  
95 AUG 16 PM 12:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

August 10, 1995

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

The  
Hillhaven  
Corporation

Re: Application by Foreign Corporation for Withdrawal

Dear Sir or Madam:

Enclosed on behalf of NCI Corp. of Delaware ("NCI") is an Application by Foreign Corporation for Withdrawal of Authority to Transact Business or Conduct Affairs in Florida and our check in the amount of \$35.00 representing the transaction fee. NCI was qualified to do business in Florida on March 14, 1995, and has not conducted any business, nor has it had any assets, since its qualification.

Please acknowledge your receipt of this Application by stamping the enclosed copy of the Application and returning it to our office in the self-addressed, stamped envelope that has been provided.

We greatly appreciate your assistance. If you have any questions regarding this matter, please do not hesitate to contact me at (206) 502-3608.

Very truly yours,

*Nancy K. Wheeler*

Nancy K. Wheeler  
Corporate Paralegal

Corporate  
Office  
1148  
Broadway  
Plaza  
Tallahassee, FL 32301

Encl.

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\*\*\*\*\*35.00 \*\*\*\*\*35.00

*Withdrawal*

N. HENDRICKS AUG 17 1995

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY  
TO TRANACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

\_\_\_\_\_  
NCI Corp. of Delaware  
(Name of Corporation)  
\_\_\_\_\_  
Delaware  
(Incorporated Under Laws Of)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

\_\_\_\_\_  
1148 Broadway Plaza  
(Mailing Address)  
\_\_\_\_\_  
Tacoma, Washington 98402  
(City - State - Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

\_\_\_\_\_  
*Ellen B. Alben*  
Signature  
\_\_\_\_\_  
8/10/95  
Date  
\_\_\_\_\_  
Ellen B. Alben  
Typed or printed name  
\_\_\_\_\_  
Assistant Secretary  
Title