2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004
Secretary of State

DOCUMENT# F97000001738

Entity Name: IDC ARCHITECTS, PC

Current Principal Place of Business:

2020 SW 4TH AVE, 3RD FLOOR
PORTLAND, OR 972014958

New Principal Place of Business:

Current Mailing Address:

2020 SW 4TH AVE, 3RD FLOOR
PORTLAND, OR 972014958

New Mailing Address:

FEI Number: 25-1587283 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
526 EAST PARK AVE.
TALLAHASSEE, FL 32301 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: D ( ) Delete
Name: DURANT, KENNETH F
Address: 2020 SW 4TH AVE, 3RD FLOOR
City-St-Zip: PORTLAND, OR 972014958

Title: D, V (X) Delete
Name: GATES, RONALD V
Address: 2020 SW 4TH AVE, 3RD FLOOR
City-St-Zip: PORTLAND, OR 972014958

Title: ST ( ) Delete
Name: KING, SUSAN D
Address: 2020 SW 4TH AVE, 3RD FLOOR
City-St-Zip: PORTLAND, OR 972014958

Title: VP ( ) Delete
Name: DINIHANIAN, HARRY
Address: 2020 SW 4TH AVENUE, 3RD FLOOR
City-St-Zip: PORTLAND, OR 97201

Title: D, P ( ) Delete
Name: TIMOTHY, MEIER
Address: 2020 SW 4TH AVENUE, 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

Title: D, V ( ) Delete
Name: WILLIAM, HEADLEY
Address: 2020 SW 4TH AVENUE, 3D FLOOR
City-St-Zip: PORTLAND, OR 97201

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: LEMMON, GEORGE
Address: 2020 SW 4TH AVE, 3RD FLOOR
City-St-Zip: PORTLAND, OR 972014958

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 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 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: SUSAN D. KING ST 04/14/2004

Electronic Signature of Signing Officer or Director Date