

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 20, 2003 8:00 am**  
**Secretary of State**

04-18-2003 90176 038 \*\*\*150.00

**DOCUMENT # F97000003479**

1. Entity Name  
**ISS PLAN SERVICES, INC.**

**IDC Facilities West, Inc.**

Principal Place of Business  
2020 SW 4TH AVENUE 3RD FLOOR  
PORTLAND OR 97201-4958

Mailing Address  
2020 SW 4TH AVENUE 3RD FLOOR  
PORTLAND OR 97201-4958

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

4. FEI Number **93-1227118**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name **National Registered Agents**

Street Address (P.O. Box Number is Not Acceptable)  
**526 East Park Avenue**

City **Tallahassee** FL **32301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* **Eric Wolk - Assistant Secretary** **5/8/03**

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

|  |   |  |
|--|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>PO<br/>DURANT, KENNETH F<br/>BOX 99<br/>DUNDEE OR</b>                    | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>VD<br/>HALL, JAMES M<br/>9015 NW SKYLINE DRIVE<br/>PORTLAND OR 97231</b> | <input checked="" type="checkbox"/> Delete |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>STD<br/>KING, SUSAN D<br/>14204 SE CRYSTAL SPRINGS<br/>PORTLAND OR</b>   | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>See attached</b>   | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   | <input type="checkbox"/> Delete            |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

|  |  |   |
|--|--|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Susan D. King** **4/14/03**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/Time Phone #

00042327



CHECK HERE IF MAKING CHANGES

CR2E034 (10/02)

ATTACHMENT

55042327

F97000003479

**IDC Facilities West, Inc.  
fna IDC Plant Services, Inc.  
Directors & Officers  
Current as of 1/1/03**

**DIRECTORS**

| <b>Name</b>       | <b>Title</b> | <b>Business Address</b>   |
|-------------------|--------------|---|
| Kenneth F. Durant | Director     | 2020 SW Fourth Ave., Third Floor<br>Portland Oregon 97201-4958        |
| Leo Michaud       | Director     | 2020 SW Fourth Ave., Third Floor<br>Portland, Oregon 97201-4958       |
| Susan D. King     | Director     | 2020 SW Fourth Ave., Third Floor<br>Portland Oregon 97201-4958        |
| Robert Gregoire   | Director     | 10419 Old Placerville Road, Suite 270<br>Sacramento, California 95827 |

**OFFICERS**

| <b>Name</b>          | <b>Title</b>        | <b>Business Address</b>   |
|----------------------|---------------------|---|
| Robert Gregoire      | President           | 10419 Old Placerville Road, Suite 270<br>Sacramento, California 95827 |
| Leo Michaud          | Vice President      | 2020 SW Fourth Ave., Third Floor<br>Portland, Oregon 97201-4958       |
| Susan D. King        | Secretary           | 2020 SW Fourth Ave., Third Floor<br>Portland, Oregon 97201-4958       |
| Michael Ralyea       | Treasurer           | 4001 North 3d Street, Suite 250<br>Phoenix, Arizona 85012             |
| Elizabeth A. McAdams | Assistant Secretary | 9191 S Jamaica Street<br>Englewood, Denver 80112                      |