

01/10/2001 08:48 4254817612

EDEN BIOSCIEN

FILED**May 31, 2001 8:00 am**
Secretary of State

05-31-2001 90001 029 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # F98000006956**

1. Entity Name

EDEN BIOSCIENCE CORPORATION

Principal Place of Business

Mailing Address

**11816 NORTH CREEK PARKWAY NORTH
BOTHELL WA 98011****11816 NORTH CREEK PARKWAY NORTH
BOTHELL WA 98011****553322**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **91-1649604**

Applied For

Not Applicable

Zip

Country

Zip

Country

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 SOUTH PINE ISLAND ROAD
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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-listing)

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing ☐ **\$5.00 May Be
Trust Fund Contribution. Added to Fees****11. OFFICERS AND DIRECTORS**

TITLE	PD	<input type="checkbox"/> Delete
NAME	BUTLER, JERRY L	
STREET ADDRESS	11816 NORTH CREEK PARKWAY N.	
CITY-STATE-ZIP	BOTHELL WA 98011-8205	
TITLE	VCO	<input type="checkbox"/> Delete
NAME	POWELL, BRAD	
STREET ADDRESS	11816 NORTH CREEK PARKWAY N.	
CITY-STATE-ZIP	BOTHELL WA 98011-8205	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WEL, ZHONGMIN	
STREET ADDRESS	11816 NORTH CREEK PARKWAY N.	
CITY-STATE-ZIP	BOTHELL WA 98011-8205	
TITLE	D	<input type="checkbox"/> Delete
NAME	JAMES, ALBERT A	
STREET ADDRESS	11816 NORTH CREEK PARKWAY N.	
CITY-STATE-ZIP	BOTHELL WA 98011-8205	
TITLE	D	<input type="checkbox"/> Delete
NAME	WEYERHAEUSER, WILLIAM T	
STREET ADDRESS	11816 NORTH CREEK PARKWAY N.	
CITY-STATE-ZIP	BOTHELL WA 98011-8205	
TITLE	D	<input type="checkbox"/> Delete
NAME	MAZA, AGATHA L	
STREET ADDRESS	11816 NORTH CREEK PARKWAY N.	
CITY-STATE-ZIP	BOTHELL WA 98011-8205	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	TITCOMB, JR., JOHN W.	
STREET ADDRESS	11816 North Creek Parkway North	
CITY-STATE-ZIP	Bothell, WA 98011-8205	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JACOBY, JON E.M.	
STREET ADDRESS	11816 North Creek Parkway North	
CITY-STATE-ZIP	Bothell, WA 98011-8205	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SANDBERG, OSCAR C.	
STREET ADDRESS	11816 North Creek Parkway North	
CITY-STATE-ZIP	Bothell, WA 98011-8205	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-STATE-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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/1 (425) 806-7300

CR2E034 (1/0/00)