2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004668

Entity Name: PCC SPECIALTY PRODUCTS, INC.

FILED May 02, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
4650 SW MACADAM AVE STE-300 PORTLAND, OR 972394262						
Current Mailing Address: New Mai					ng Address	s:
4650 SW MACADAM AVE STE-300 PORTLAND, OR 972394262						
FEI Number: 06-1114587		FEI Number Applied For () FEI Nu				Certificate of Status Desired ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US						
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						
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:						
Title: Name: Address: City-St-Zip:	DONEGAN, MA	ADAM AVE., SUITE 300		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	LARSSON, WII	ADAM AVE., SUITE 300		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	DELANEY, GR	HWY., BLDG. 3, STE. 3301		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	KONKOL, DEN	RIVERWOOD DR.		Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	DONEGAN, MA	ADAM AVENUE, STE 440		Title: Name: Address: City-St-Zip:	VP ROSKOPF, I 4650 SW M/ PORTLAND,	ACADAM AVENUE, STE 440
Title: Name: Address: City-St-Zip:	COOKE, ROGE	ADAM AVENUE, STE 440		Title: Name: Address: City-St-Zip:	S COOKE, RO 4650 SW M/ PORTLAND,	ACADAM AVENUE, STE 440
I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: MARK ROSKOPF VP 05/02/2007