**PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE Katherinê Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # KR2451

## Jun 22, 1999 8:00 am Secretary of State

06-22-1999 90003 050 \*\*\*150.00 07-27-1999 90010 027 \*\*\*400.00

	MANCE CONSULTING INT						
Principal Plac	e of Business	Malling Address			(100 is in section that see and the		
S. 1904 MOLTER ROAD PO BOX 160 LIBERTY LAKE WA 99019 LIBERTY LAKE WA 99019							
		US			DO NOT WRITE IN THIS	SPACE	
	·				3. Date incorporated or Qualified 04/20/1989		
2. Principal F	Place of Business	2a. Mailing Address			4, FE) Number	Ap	piled For
21 26				59-2944101	, No	t Applicable	
Suite, Apt. #, etc.		Sulte, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 / Fee Re		
City & Stat	te	City & State	<del>_</del>		a Florita Camarina Sinancina SE 00 servi		May Re
23		28		<del> </del>	Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cour	itry	8. This corporation owes the current year In		□No
24	25	29	30		Personal Property Tax.	Agent	□N0
	9. Name and Address of Curre	nt Registered Agent	<del>-  </del>	81 Name	10. Name and Address of New Registered	Allani	<del></del>
REN	ININGER, RICHARD G.		l'	GI Name			
	5 HEAVEN SIDE CT.		- [	82 Street Add	ress (P.O. Box Number is Not Acceptable)		1
	KSONVILLE FL 32257		}	83			
			]	• •			
			[	84 City	FI	85 Zip (	Code
dd Directions	to the service of Continue CO7 A5	nn and Ch7 1Eng Florida Statet	ne the ob	own pamed com		f changing its	registered
office or a	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was a stions of Section 607.0505. Florida.	uthorized rida Statu	by the corporati	poration submits this statement for the purpose of one board of directors. I hereby accept the appoint	intment as re	gistered
•							
SIGNATURE	Signature, typed or printed name of registered again	ant and title if spolicable. (NOTE:	Registered A	gent signature require	d when reinstating) DATE		
SIGNATURE	Signature, typed or printed name of registered ago OFFICERS A	ent and title if applicable. (NOTE: ND DIRECTORS	Registered A	gent signature require		ND DIRECTO	
SIGNATURE  12.  TITLE	Signature, typed or printed name of registered ap OFFICERS A	ant and title if spolicable. (NOTE:	13	gent signature require	d when reinstating) DATE		
SIGNATURE 12. TITLE NAME	Signature, typed or printed name of registered ap OFFICERS AI D RENNINGER, RICHARD G	ent and title if applicable. (NOTE: ND DIRECTORS	13. 1.1 T/III. 1.2 NAA	gent signatura require	d when reinstating) DATE	ND DIRECTO	
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signisture, typed or privided name of registered ap OFFICERS AI D RENNINGER, RICHARD G S. 1904 MOLTER ROAD	ent and title if applicable. (NOTE: ND DIRECTORS	13. 1.1 T/TL 1.2 NAA 1.3 STR	gent signature require E RE REET ADDRESS	d when reinstating) DATE	ND DIRECTO	
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA	ent and title if applicable. (NOTE. ND DIRECTORS	13. 1.1 TM, 1.2 NAA 1.3 STR 1.4 CM	Gent signature require E RE RETADORESS (-ST-ZIP	d when reinstating) DATE	ND DIRECTO	RS IN 12
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D	ent and title if applicable. (NOTE: ND DIRECTORS	13. 1.1 FM. 12 NAA 1.3 STR 1.4 CITI	E  E  E  E  E  E  E  T  T  T  T  T  T  T	d when reinstating) DATE	ND DIRECTO	RS IN 12  Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D.	ent and title if applicable. (NOTE. ND DIRECTORS	13. 1.1 FM. 12 NAA 1.3 STR 1.4 CIT 2.1 TM. 22 NAA	Gent agneture require  E  E  E  E  E  E  T-ST-ZIP  E	d when reinstating) DATE	ND DIRECTO	RS IN 12  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  ORENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD	ent and title if applicable. (NOTE. ND DIRECTORS	13. 1.1 TTL 12 NAA 1.3 STR 1.4 CIT 21 TTL 22 NAA 2.3 STR	E  E  E  E  E  E  E  T  D  E  E  E  E  E  E  E  E  E  E  E  E	d when reinstating) DATE	ND DIRECTO	RS IN 12  Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D.	ent and title if applicable. (NOTE. ND DIRECTORS	13. 1.1 TTL 12 NAA 1.3 STR 1.4 CIT 21 TTL 22 NAA 2.3 STR	E  E  E  E  E  E  F  S  T  S	d when reinstating) DATE	ND DIRECTO	RS IN 12  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  ORENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD	and and title if applicable. (NOTE) ND DIRECTORS  DELETE  DELETE	13. 1.1 WR. 12 NAA 1.3 STR 1.4 CIT 22 NAA 2.3 STR 2.4 CIT	E  E  E  E  E  E  E  T  S  T	d when reinstating) DATE	ND DIRECTO Change	RS IN 12  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	and and title if applicable. (NOTE) ND DIRECTORS  DELETE  DELETE	13. 1.1 TTL 12 NAA 1.3 STR 1.4 GITL 22 NAA 2.3 STR 2.4 CIT 3.1 TTL 32 NAA	E  E  E  E  E  E  E  T  S  T	d when reinstating) DATE	ND DIRECTO Change	RS IN 12  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	and and title if applicable. (NOTE) ND DIRECTORS  DELETE  DELETE	13. 1.1 TTT, 12 NAA 1.3 STR 1.4 GIT 2.1 TTT, 2.2 NAA 2.3 STR 2.4 GIT 3.1 TTT, 3.2 NAA 3.3 STR	E  AE EET ADDRESS (-ST-ZP) E  EET ADDRESS Y-ST-ZP  E EET ADDRESS Y-ST-ZP  E	d when reinstating) DATE	ND DIRECTO Change	RS IN 12  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	and and title if applicable. (NOTE) ND DIRECTORS  DELETE  DELETE	13. 1.1 TTT, 12 NAA 1.3 STR 1.4 GIT 2.1 TTT, 2.2 NAA 2.3 STR 2.4 GIT 3.1 TTT, 3.2 NAA 3.3 STR	E  AE EET ADDRESS (-ST-ZIP E EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP E EET ADDRESS Y-ST-ZIP	d when reinstating) DATE	ND DIRECTO Change	RS IN 12  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	ant and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE	13. 1.1 TTT. 12 NAA 1.3 STR 1.4 GITT 22 NAA 2.3 STR 2.4 GIT 3.1 TTT. 32 NAA 3.3 STR 3.4 CIT	E  AE EET ADDRESS (-ST-ZIP  E EET ADDRESS Y-ST-ZIP  E EET ADDRESS Y-ST-ZIP  E ET ADDRESS Y-ST-ZIP  E	d when reinstating) DATE	ND DIRECTO Change Change	RS IN 12  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	ant and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE	13. 1.1 TTT, 12 NAA 1.3 STR 1.4 GIN 2.1 TTT, 2.2 NAA 2.3 STR 2.4 GIT 3.1 TTT, 3.2 NAA 3.3 STR 3.4 GIT 4.1 TTT, 4.2 NAA	E  AE EET ADDRESS (-ST-ZIP  E EET ADDRESS Y-ST-ZIP  E EET ADDRESS Y-ST-ZIP  E ET ADDRESS Y-ST-ZIP  E	d when reinstating) DATE	ND DIRECTO Change Change	RS IN 12  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	ant and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE	13. 1.1 TTT. 12 NAA 1.3 STR 1.4 CIT 22 NAA 2.3 STR 2.4 CIT 3.1 TTT. 32 NAA 3.3 STR 3.4 CIT 4.1 TTT. 4.2 NAA 4.3 STR	Gent signature require  E  AE  EEET ADDRESS  (-ST-ZIP  E  EEET ADDRESS  Y. ST-ZIP  E  EET ADDRESS  Y. ST-ZIP  E  EET ADDRESS  Y. ST-ZIP  E	d when reinstating) DATE	ND DIRECTO Change Change	RS IN 12  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	ant and title if applicable. (NOTE:  ND DIRECTORS  DELETE  DELETE	13. 1.1 TTT. 12 NAA 1.3 STR 1.4 CIT 22 NAA 2.3 STR 2.4 CIT 3.1 TTT. 32 NAA 3.3 STR 3.4 CIT 4.1 TTT. 4.2 NAA 4.3 STR	Gent algorithm require  E  RE  RE  RE  RE  RE  RE  RE  RE  RE	d when reinstating) DATE	ND DIRECTO Change Change	RS IN 12  Addition  Addition
SIGNATURE  12.  WILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	INOTE:  IND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. TTI. 1.1 TTI. 1.2 MAA 1.3 STR 1.4 CITI 2.1 TTI. 2.2 NAA 2.3 STR 2.4 CIT 3.1 TTI. 3.2 NAA 3.3 STR 4.1 TTI. 4.2 NAA 4.3 STR 4.4 CITI.	Gent algorithm require  E  EET ADDRESS  Y-ST-ZIP  E  EET ADDRESS Y-ST-ZIP  E  EET ADDRESS Y-ST-ZIP  E  EET ADDRESS Y-ST-ZIP  E  EET ADDRESS	d when reinstating) DATE	OChange  Change  Change	RS IN 12  Addition  Addition
SIGNATURE  12.  WILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  ITTLE	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	INOTE:  IND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. TITL 12 NAA 13 STR 14 CITI 22 NAA 23 STR 2.4 CIT 32 NAA 33 STR 4.1 TITL 4.2 NAA 4.3 STR 4.4 CITI 5.1 TITL 5.2 NAA	Gent algorithm require  E  EET ADDRESS  Y-ST-ZIP  E  EET ADDRESS Y-ST-ZIP  E  EET ADDRESS Y-ST-ZIP  E  EET ADDRESS Y-ST-ZIP  E  EET ADDRESS	d when reinstating) DATE	OChange  Change  Change	RS IN 12  Addition  Addition
SIGNATURE  12.  WILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	INOTE  IND DIRECTORS  DELETE  DELETE  DELETE  DELETE  DELETE	13 TTL 12 NAA 13 STR 14 CITT 21 TTL 22 NAA 23 STR 24 CITT 41 TTL 42 NAA 43 STR 44 CITT 51 TTL 52 NAA 53 STR 54 CITY	Gent algorithm require  E  EET ADDRESS  Y-ST-ZIP  E  EET ADDRESS  Y-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP  E  EET ADDRESS  /-ST-ZIP	d when reinstating) DATE	Change  Change  Change	RS IN 12  Addition  Addition  Addition
SIGNATURE  12.  WILE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	INOTE:  IND DIRECTORS  DELETE  DELETE  DELETE  DELETE	13. TITL 1.3 TITL 1.3 STR 1.4 CITL 2.1 TITL 2.2 NAA 2.3 STR 2.4 CITL 4.2 NAA 4.3 STR 4.4 CITL 5.2 NAA 5.3 STR 5.4 CITL 5.3 TITL 5.2 NAA 5.3 STR 5.4 CITL 6.3 TITL 6.3 TITL 6.3 TITL 6.3 TITL 6.3 TITL 6.3 TITL 6.4 CITL 6.5 TITL 6.5	Gent algoritum require  E  AE  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS	d when reinstating) DATE	OChange  Change  Change	RS IN 12  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	INOTE  IND DIRECTORS  DELETE  DELETE  DELETE  DELETE  DELETE	13. TITL 1.3 TITL 1.3 STR 1.4 CITT 2.1 TITL 2.2 NAA 2.3 STR 2.4 CITT 4.1 TITL 4.2 NAA 4.3 STR 4.4 CITT 5.1 TITL 5.2 NAA 5.3 STR 5.4 CITT 5.3 TITL 6.2 NAA 6.3 NAA 6.3 TITL 6.2 NAA	Gent algoritum require  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS	d when reinstating) DATE	Change  Change  Change	RS IN 12  Addition  Addition  Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	OFFICERS A  OFFICERS A  OFFICERS A  ORENNINGER, RICHARD G S. 1904 MOLTER ROAD LIBERTY LAKE WA  D RENNINGER, ROCHELLE D. S. 1904 MOLTER ROAD LIBERTY LAKE WA	INOTE  IND DIRECTORS  DELETE  DELETE  DELETE  DELETE  DELETE	13. TITL 1.3 STR 1.4 CITL 2.1 TITL 2.2 NAA 2.3 STR 2.4 CITL 3.1 TITL 4.2 NAA 4.3 STR 4.4 CITL 5.2 NAA 5.3 STR 5.4 CITL 5.3 STR 5.4 CITL 6.2 NAA 6.3 STR 6.2 NAA 6.3 STR	Gent algoritum require  E  AE  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS  /-ST-ZIP  E  EEET ADDRESS	d when reinstating) DATE	Change  Change  Change	RS IN 12  Addition  Addition  Addition

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informational indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIC	GN	IΑ	TL	JR	E:

	$\sim$	//		*	
<i>2</i> .5	GARAT	~1.//\		0 T ( C T	
<b>7.3</b> 1	1 TANKA 1	リソノクシリー		N 10 C	
			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		حی محد



K82461 596221-90010-27

## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 24, 1999

PERFORMANCE CONSULTING INTERNATIONAL, INC. PO BOX 160 LIBERTY LAKE, WA 99019 US

SUBJECT: PERFORMANCE CONSULTING INTERNATIONAL, INC.

Ref. Number: K82451

Please be advised, we have received your Annual Report for the above corporation and your check(s) totaling \$150.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the annual report is \$150.00 plus \$400.00 late fee for a total of \$550.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$400.00.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

ANNUAL REPORTS SECTION /sh