

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000001619

Entity Name: KITTELSON LLC

FILED
Jan 03, 2008
Secretary of State

Current Principal Place of Business:

610 SW ALDER STREET, SUITE 700
PORTLAND, OR 97205

New Principal Place of Business:

Current Mailing Address:

610 SW ALDER STREET, SUITE 700
PORTLAND, OR 97205

New Mailing Address:

FEI Number: 20-8861006

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KITTELSON, WAYNE K
110 E. BROWARD BLVD, STE 2410
FORT LAUDERDALE, FL 33301 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KITTELSON, WAYNE K
Address: 610 SW ALDER STREET, SUITE 700
City-St-Zip: PORTLAND, OR 97205

Title: MGR () Delete
Name: VANDEHEY, MARK A
Address: 610 SW ALDER STREET, SUITE 700
City-St-Zip: PORTLAND, OR 97205

Title: MGR () Delete
Name: VAN DYKE, LAWRENCE A
Address: 610 SW ALDER STREET, SUITE 700
City-St-Zip: PORTLAND, OR 97205

ADDITIONS/CHANGES:

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 exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAWRENCE VAN DYKE

MGR

01/03/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date