2000 UNIFORM BUSINESS REPORT (UBR)

2000 UNIFORM BUSINESS REPORT (UBR)					APPROVED AND		
DOCUMENT # M9900001637 1. Entity Name					FILED		
WRI OPPORTUNITY LOANS II LLC					00 MAY 30 AM 9: 27		
					SECRETARY	OF STATE	
Principal Place of Business Mailing Address					TALLAHASSEE	E, FLORIDA	
1301 FIFTH AVENUE. SUITE 3128 1301 FIFTH AVENUE. SUITE				TE 3128			
SEATTLE WA	98101		SEATTLE WA 98101-2649				
	·	,					
Principal Place of Business 3. Mailing Address						B	
Suite, Apt. #, etc.			Suite, Apt. #, etc.		DO NOT WRITE IN TH	HIS SPACE	
City & State City &			City & State		4. FEI Number	Applied For	
Zip	Zip Country		Zip Country		91-1984909	Not Applicable \$5.00 Additional	
- .⊬					5. Certificate of Status Desired	Fee Required	
Name and Address of Current Registered Agent				Name	7. Name and Address of New Registered Agent Name		
CORPORATION SERVICE COMPANY				Street Address	Street Address (P.O. Box Number is Not Acceptable)		
1201 HAYS STREET				Street Address	Street Address (F.O. Box Number is Not Acceptable)		
TALLAHASSEE FL 32301-2525							
•				City		FL Zip Code	
8. The above	named entity submits	s this statement for the	purpose of changing its	registered office or regis	stered agent, or both, in the State of Florida.		
SIGNATURE .	Signature, typed or printed n	ame of registered agent and title	if applicable. (NOTE	: Registered Agent signature requ	uired when reinstating) DA	TE	
			FILE NO	OW!!! FEE IS \$50.0	00	,	
				yable to Department	3		
9.	М	ANAGING MEMBERS/	MEMBERS	10.	ADDITIONS/CHANG	GES	
TITLE	MGRM	W CONTO WEIGHER	☐ Delete	TITLE		Change Addition	
NAME	WEYERHAEUSER	REALTY INVESTOR	S, INC.	NAME	•		
STREET ADDRESS CITY-ST-ZIP	1301 FIFTH AVEN SEATTLE WA 981			STREET ADDRESS CITY-ST-ZIP		•	
TITLE	SEATTLE WA 901	UI .	☐ Delista	IIILE		☐ Change ☐ Addition	
MAME				RAME			
STREET ADDRESS CITY-ST-ZIP				STREET ANDRESS CITY-ST-ZIP			
TITLE			☐ Delete	mus		Change Addition	
RAME		was an in the		MANE		<u> </u>	
STREET ADDRESS CITY- ST- ZIP				STREET ADDRESS CITY-ST-ZIP			
TITLE			□ Delete	TITLE		Change Addition	
NAME			Descis	MAME			
STREET ADDRESS			•	STREET ADDRESS			
CITY-ST-ZIP				CITY-81-ZIP	600032		
TITLE Name			Delete	TITLE NAME	-06/14/0	001120003	
STREET ADDRESS				STREET ADDRESS	*****56	30 Anni 5 Anni 001120003 .00 *****5 5 :00	
CITY-81-ZIP	7.		— -	CITY-ST-ZIP			
TITLE NAME			☐ Delets	TITLE NAME		Change Addition	
STREET ADDRESS	-			STREET ADDRESS			
CFTY-87-ZIP				CITY-\$T-ZIP			
11. I hereby of indicated limited lia	certify that the information this report is true ability company or the	tion supplied with this and accurate and that receiver or trustee empty.	filing does not qualify for my signature shall have to powered to execute this	the exemption stated in the same legal effect as report as required by Ch	i Section 119.07(3)(i), Florida Statutes. I further if made under oath; that I am a managing me lapter 608, Florida Statutes.	certify that the information mber or manager of the	

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

5/24/00

206-264-2257 Daytime Phone #