

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 03, 2001 8:00 am**  
**Secretary of State**

02-03-2001 90066 014 \*\*\*150.00

**DOCUMENT # P14823**

1. Entity Name  
**TJ INTERNATIONAL, INC.**

Principal Place of Business

**200 E. MALLARD  
 BOISE ID 83706  
 US**

Mailing Address

**P.O. BOX 65  
 BOISE ID 83707  
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**Tax Dept. CH2F29**

**PO Box 9777**

**Federal Way WA**

**98063-9777**

**US**



DO NOT WRITE IN THIS SPACE

4. FEI Number **82-0250992**

Applied For

Not Applicable

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 reinstating)

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  
 Trust Fund Contribution. ☐

**\$5.00 May Be  
 Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCD DENIG, THOMAS H. 200 E. MALLARD DR. BOISE ID	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DRURY, RICHARD B. 200 E. MALLARD DR. BOISE ID	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, WILLIAM J. 5215 OLD SKOKIE RD. SKOKIE IL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHEELWRIGHT, STEVEN C. 107 RUTLEDGE RD BELMONT MA	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP OLSON, JODY B. 200 E. MALLARD DR. BOISE ID	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HEUSINKVELD, VALERI, A 200 E MALLARD DR BOISE ID	<input checked="" type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Schedule Attached	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

**Larry W. Pollock**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**1-11-01 253-924-2254**

CR2E034 (10/00)

Attachment  
912837  
P14823

**TJ INTERNATIONAL, INC.**

**F.E.I.N. 82-0250992**

**OFFICERS AND DIRECTORS**

Director	Robert A. Dowdy	33663 Weyerhaeuser Way S, Federal Way WA 98003
Director	Claire S. Grace	33663 Weyerhaeuser Way S, Federal Way WA 98003

**OFFICERS**

President	Thomas H. Denig	200 E Mallard DR, Boise ID 83706
Vice President	Scott R. Marshall	33405 8th Ave S, Federal Way WA 98003
V.P. & General Counsel	Robert A. Dowdy	33663 Weyerhaeuser Way S, Federal Way WA 98003
Secretary	Claire S. Grace	33663 Weyerhaeuser Way S, Federal Way WA 98003
VP & Treasurer	Richard J. Taggart	33663 Weyerhaeuser Way S, Federal Way WA 98003
Assistant Treasurer	Robert C. Adams	200 E Mallard DR, Boise ID 83706
Assistant Treasurer	N. J. Lund	33663 Weyerhaeuser Way S, Federal Way WA 98003
Assistant Treasurer	John A. Maurel	33663 Weyerhaeuser Way S, Federal Way WA 98003
Assistant Treasurer	Jeffrey W. Nitta	33940 Weyerhaeuser Way S, Federal Way WA 98001
Assistant Secretary	Vicki A. Merrick	33663 Weyerhaeuser Way S, Federal Way WA 98003
Assistant Secretary	Larry W. Pollock	33663 Weyerhaeuser Way S, Federal Way WA 98003