Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90147 018 ***150.00

FILE NOW: FILING FEE, AFTER MAY 1ST IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P17376

1. Corporation Name

Principal Place of Business

EVERGREEN AVIATION GROUND LOGISTICS ENTERPRISE,

| 3850 THREE N MCMINNVILLE | IILE LANE OR 971 <i>2</i> 8-9496 | 3850 THREE MILE LANE MCMINNVILLE OR 97128-3496 | 3 | DO NOT WRITE IN THE 3. Date Incorporated or Qualifed 12/24/1987 | IS SPACE | |
|-----------------------------|--|---|--|---|----------|-------------------|
| 2 Principal D | Place of Business | 2a, Mailing Address | | 4. FEI Number | Apr | lied For |
| 21 | | 26 | | 93-0876736 | Not | Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | \$8.75 A | |
| 22 | · | 27 | | 5. Certificate of Status Desired | Fee Re | ` |
| City & Sita | te | City & State | | 6. Election Campaign Financing | \$5.00 r | |
| 23 | | 28 | | Trust Fund Contribution | Added to | Fees |
| Zip | Country | Zip | Country | 8. This corporation owes the current year | | ¬ |
| 24 | 25 | 29 3 | 0 | Personal Property Tax. | | □No |
| | 9. Name and Address of Curren | : Registered Agent | 81 Name | 10. Name and Address of New Register | d Agent | |
| 120 | CORPORATION SYSTEM OS PINE ISLAND ROAD INTATION FL 33324 | | 82 Street A | vidress (P.O. Box Number is Not Acceptable) | | |
| | | | 84 City | | 85 Zip C | ode |
| SIGNATURE | am familiar with, and accept the obliga | | egistered Agent signature re | | | |
| 12. | |) DIRECTORS | 13. | ADDITI ONS/CHANGES TO OFFICERS | | |
| TITLE | P | ☐ DELETE | 1.1 TITLE | Director | Change | Addition |
| NAME | BAUER, BRIAN | | 1.2 NAME | Delford M. Smith | | |
| STREET ADDRESS | AARA TUBEE MUSIC LANE | | 1.3 STREET ADDRESS | 3850 Three Mile Lane | | |
| CITY-ST-ZIP | MCMINNVILLE OR 97128 | | 1.4 CITY-ST-ZIP | McMinnville, OR 97128 | | |
| TITLE | V | ☐ DELETE | 2.1 TITLE | Director | Change | Addition |
| NAME | SPENCER, MIKE | | 2.2 NAME | Ronald A. Lane | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | 3850 Three Mile Lane | | |
| CITY-ST-ZIP | MCMINNVILLE OR 97128 | | 2. 4 CITY- ST-ZIP | McMinnville, OR 97128 | = | FET A state |
| TITLE | V | DELETE | 3.1 TITLE | Director | Change | X Addition |
| NAME | IRWIN, JOHN A | - | 3.2 NAME | Timothy G. Wahlberg | | |
| STREET ADDRESS | 3850 THREE MILE LANE | | | | | |
| | O OOO HILLE MILE CALL | | 3.3 STREET ADDRESS | 3850 Three Mile Lane | | |
| CITY-ST-ZIP | MCMINNVILLE OR 97128 | | 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP | 3850 Three Mile Lane | | |
| TITLE | 1 | ☐ DELETE | | 3850 Three Mile Lane McMinnville, OR 97128 Director | Change | ₩ Addition |
| | MCMINNVILLE OR 97128 | DELETE | 3.4. CITY-ST-ZIP | 3850 Three Mile Lane | Change | Addition |
| TITLE | MCMINNVILLE OR 97128 V KELLY, LIANE | ☐ DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE | 3850 Three Mile Lane McMinnville, OR 97128 Director | Change | ∑ Addition |
| TITLE NAME | MCMINNVILLE OR 97128 V KELLY, LIANE | DELETE | 3.4. CITY-ST-ZIP 4.1 TITLE 4 2 NAME | 3850 Three Mile Lane -McMinnville, OR 97128 - Director - Larry K. Lane | ☐ Change | Addition |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0 '(3)(i), Florida Statutes. I further certify that the information 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 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 12 or Block 13 if chartreet, or on an attact ment with an address with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

☐ DELETE

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Glenn L. Albus, Secretary 1/29/99

Date

503-472-9361

Change

Daytime Phone #

Addition