
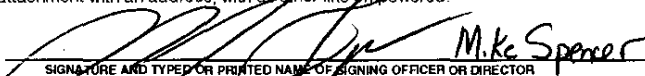


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2004 8:00 am
Secretary of State

05-21-2004 90003 001 ***150.00

DOCUMENT # P17376					
1. Entity Name EVERGREEN AVIATION GROUND LOGISTICS ENTERPRISE, INC.					
Principal Place of Business 3850 THREE MILE LANE MCMINNVILLE, OR 97128-9496			Mailing Address 3850 THREE MILE LANE ATTN: TAX DEPT MCMINNVILLE, OR 97128-9496		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 93-0876736	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BAUER, BRIAN 3850 THREE MILE LANE MCMINNVILLE, OR 97128		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GWENNA R. WOODRESS 3850 THREE MILE LANE MCMINNVILLE, OR 97128	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SPENCER, MIKE 3850 THREE MILE LANE MCMINNVILLE, OR 97128		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TJ JOHN A. IRWIN 3850 THREE MILE LANE MCMINNVILLE, OR 97128	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, DELFORD M 3850 THREE MILE LANE MCMINNVILLE, OR 97128		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAUER, BRIAN T 3850 THREE MILE LANE MCMINNVILLE, OR 97128		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	O WAHLBERG, TIMOTHY G 3850 THREE MILE LANE MCMINNVILLE, OR 97128		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 			5/11/04 303-472-9361		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		