PROFIT CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
95 AUG -3 AM 9:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P17864 (0)

1. Corporation Name
SPI/JUPITER INC.

Principal Place of Business	Mailing Address
1601 5TH AVE., SUITE #1900 SEATTLE WA 98101	1601 5TH AVE., SUITE #1900 SEATTLE WA 98101

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 02/02/1988	3a. Date of Last Report: 05/01/1994
4. FEI Number: 91-1390287	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

2. Principal Place of Business	2a. Mailing Address
21 1201 Third Avenue	26 1201 Third Ave
Suite, Apt. #, etc. 22 #5400	Suite, Apt. #, etc. 27 #5400
City & State 23 Seattle, Washington	City & State 28 Seattle, Washington
Zip 24 98101 Country 25 USA	Zip 29 98101 Country 30 USA

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	PFLEGER, PAUL A	12 NAME		
STREET ADDRESS	1601 5TH AVENUE #1900	13 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA	14 CITY-ST-ZIP		
TITLE	VPD	21 TITLE		☐ Change ☐ Addition
NAME	OREHEK, JOHN M	22 NAME		
STREET ADDRESS	1601 5TH AVENUE #1900	23 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA	24 CITY-ST-ZIP		
TITLE	S	31 TITLE		☐ Change ☐ Addition
NAME	FULBRIGHT, MICHAEL G	32 NAME	MICHAEL FULBRIGHT	
STREET ADDRESS	1601 5TH AVENUE #1900	33 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA	34 CITY-ST-ZIP		
TITLE	AS	41 TITLE		☐ Change ☐ Addition
NAME	WILSON, BRANDY A.	42 NAME		
STREET ADDRESS	1601 5TH AVE.	43 STREET ADDRESS		
CITY-ST-ZIP	SEATTLE WA	44 CITY-ST-ZIP		
TITLE	T	51 TITLE	T-VACANT	☐ Change ☐ Addition
NAME	~~EADON, CHRISTOPHER J~~	52 NAME		
STREET ADDRESS	~~1601 5TH AVENUE, #1900~~	53 STREET ADDRESS		
CITY-ST-ZIP	~~SEATTLE WA~~	54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 changed, or on an attachment with an address.

SIGNATURE: Brandy A. Wilson 7/18/95 (206) 628-8013
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (3/95)

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