

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2001 8:00 am
Secretary of State

01-31-2001 90044 014 ***150.00

DOCUMENT # P28736

1. Entity Name
HOLIDAY RETIREMENT CORP.

Principal Place of Business

Mailing Address

P.O. BOX 14111
 SALEM OR 97309
 US

PO BOX 14111
 ATTN: DELLANE COLSON
 SALEM OR 97309
 US

C0013089



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **93-0937196**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

CT CORPORATION
1200 S. PINE ISLAND RD.
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 PD Delete
 NAME COLSON, WILLIAM E.
 STREET ADDRESS 2250 MCGILCHRIST ST. SE
 CITY-ST-ZIP SALEM OR

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VPD Delete
 NAME COLSON, BARTON
 STREET ADDRESS 2250 MCGILCHRIST ST. SE
 CITY-ST-ZIP SALEM OR

TITLE Director Change Addition
 NAME Barton E. Colson
 STREET ADDRESS 2250 mcgilchrist st. SE
 CITY-ST-ZIP Salem, OR 97302

TITLE SD Delete
 NAME BRUCE D THORN
 STREET ADDRESS 2250 MCGILCHRIST ST. SE
 CITY-ST-ZIP SALEM OR 97302

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME HUDDART, JAMES L.
 STREET ADDRESS 3276 COMMERCIALM ST.
 CITY-ST-ZIP SALEM OR

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE D Delete
 NAME BATY, DANIEL R.
 STREET ADDRESS 2105 N. 30TH STREET
 CITY-ST-ZIP TACOMA WA

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Vice President / Director Change Addition
 NAME Sami T. Akrawi
 STREET ADDRESS 1303 Christie Ave., #2207
 CITY-ST-ZIP Emeryville, CA 94608

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William E. Colson

Date

1/23/01

Daytime Phone #

503 370-2011
x7209

CR2E034 (10/00)

Attachment
C0013089
P28736

HOLIDAY RETIREMENT CORP.
Document # P28736

Additional Directors

Norman L. Brenden	2250 McGilchrist St. SE, Salem, OR 97302
May S. Hasso	1 Napoli, Newport Beach, CA 92660
James D. Stringer	2250 McGilchrist St. SE, Salem, OR 97302
Thilo-D. Best	2250 McGilchrist St. SE, Salem, OR 97302
Christine Wiegall	2250 McGilchrist St. SE, Salem, OR 97302
Patrick F. Kennedy	2025 1 st Avenue, Suite 890, Seattle, WA 98121