2004 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

SIGNATUSE AND TYPED ON PRINTED NAME OF SIGNING OFFICER

May 03, 2004 8:00 am Secretary of State DOCUMENT # P30043 05-03-2004 90440 006 ***150 00 **BOEING REALTY CORPORATION** Principal Place of Business Mailing Address TANTDWAN 15480 LAGUNA CANYON ROAD, SUITE 200 15480 LAGUNA CANYON ROAD, SUITE 200 MC 1660-2200 MC 1660-2200 IRVINE, CA 92618 IRVINE, CA 92618 US Principal Place of Business N. KIVENSIAN 3. Mailing Addres Suite, Apt. #, etc 04272004 Chg-P CR2E034 (10/03) 2003 4. FEI Number Applied For nicaa 60006 95-2775666 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required <u>voloblo</u> 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301 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. Signature, typed or printed name of registered agent and title it applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE 🛣 Delete TITLE ☐ Addition R. Paul Kinscherff SKOWRONSKI, WALTER E NAME NAME STREET ADDRESS 100 N Riverside PIAZA 7755 EAST MARGINAL WAY SOUTH STREET ADDRESS Chicago, Ti 60006 CITY-ST-ZIP SEATTLE, WA 98108 CITY-ST-ZIP TITLE TITLE Change ☐ Addition Delete BARKER, STEPHEN J NAME NAME traia Saddlee STREET ADDRESS 15480 LAGUNA CANYON RD., STE. 200 STREET ADDRESS 100 N. Riversde Plaza CITY-ST-ZIP **IRVINE, CA 92618** CITY-ST-ZIP Chicago, IL bolable secratary TITLE 💢 Delete TITLE Change Change ☐ Addition SOODIK, BONNIE W and Bresslove N. Liverside Plaza NAME NAME sera al STREET ADDRESS 2810 160TH AVE., SE BLGD, 33-01 STREET ADDRESS CITY-ST-ZIP BELLEVUE, WA 98008 CITY-ST-ZIP 60606 Delete TITLE TITLE 🚺 Change Addition BRESSLOUR, GERALD 3 ARM CENTER PLAZA NAME NAME STREET ADDRESS 7755 E. MARGINAL WAY S, M/C 13-08 STREET ADDRESS SEATTLE, WA 98108 CITY-ST-ZIP CITY-ST-ZIP Chicago. 6010010 Change Change TITLE ☐ Addition TITLE James # Zrust PALMER, JAMES F NAME NAME STREET ADDRESS 500 NANCHEZ AVE SW. BLDG 7-244, 3RD FLOOR STREET ADDRESS OD N. Riveraide Plaza CITY-ST-ZIP RENTON, WA 98055 CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition DEFRANCIS, ALAN NAME NAME STREET ADDRESS 15480 LAGUNA CANYON RD., STE. 200 STREET ADDRESS **IRVINE, CA 92618** CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 justee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or changed, or on an attachment with

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