FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 27 AM 8:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P32370** **(9)**

1. Corporation Name

PHC ORLANDO LIMITED, INC.

Principal Place of Business	Mailing Address
825 N.E. MULTNOMAH STREET SUITE 775 PORTLAND OR 97232-2152	825 N.E. MULTNOMAH STREET SUITE 775 PORTLAND OR 97232-2152

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/03/1991
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business — 21
2a. Mailing Address — 26

Suite, Apt. #, etc. — 22
Suite, Apt. #, etc. — 27

City & State — 23
City & State — 28

Zip — 24 Country — 25
Zip — 29 Country — 30

4. FEI Number: 93-1045053 ☐ 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

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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	P/D	☒ Change ☒ Addition
NAME	~~PERESSINI, WILLIAM E.~~	12 NAME	Craig N. Longfield	
STREET ADDRESS	~~825 N.E. MULTNOMAH ST., NO. 775~~	13 STREET ADDRESS	825 NE Multnomah St., Ste. 775	
CITY-ST-ZIP	~~PORTLAND OR~~	14 CITY-ST-ZIP	Portland, OR 97232	
TITLE	~~DP~~	21 TITLE	D	☒ Change ☐ Addition
NAME	HENDERSON, MICHAEL C	22 NAME		
STREET ADDRESS	825 NE MULTNOMAH ST	23 STREET ADDRESS		
CITY-ST-ZIP	PORTLAND OR	24 CITY-ST-ZIP		
TITLE	AS	31 TITLE		☐ Change ☐ Addition
NAME	NOFZIGER, SALLY A.	32 NAME		
STREET ADDRESS	825 N.E. MULTNOMAH ST., NO. 775	33 STREET ADDRESS		
CITY-ST-ZIP	PORTLAND OR	34 CITY-ST-ZIP		
TITLE	~~AVP~~	41 TITLE	V	☒ Change ☐ Addition
NAME	PARK, CHARLES A.	42 NAME		
STREET ADDRESS	825 N.E. MULTNOMAH ST., NO. 775	43 STREET ADDRESS		
CITY-ST-ZIP	PORTLAND OR	44 CITY-ST-ZIP		
TITLE	~~S~~	51 TITLE	S	☒ Change ☒ Addition
NAME	~~WINSLOW, MICHAEL T.~~	52 NAME	George C. Schreck	
STREET ADDRESS	~~825 N.E. MULTNOMAH ST., NO. 775~~	53 STREET ADDRESS	825 NE Multnomah St., Ste. 775	
CITY-ST-ZIP	~~PORTLAND OR~~	54 CITY-ST-ZIP	Portland, OR 97232	
TITLE	~~TO~~	61 TITLE	T/C	☒ Change ☒ Addition
NAME	~~BELL, JACQUELINE S~~	62 NAME	Reynold Roeder	
STREET ADDRESS	~~825 NE MULTNOMAH ST~~	63 STREET ADDRESS	825 NE Multnomah St., Ste. 775	
CITY-ST-ZIP	~~PORTLAND OR~~	64 CITY-ST-ZIP	Portland, OR 97232	

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: George C. Schreck 4/19/95 (503) 797-7200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Secretary

0482126 FP

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EXHIBIT A

PHC ORLANDO LIMITED, INC.

P32370 (9)

Vice President and Managing Director	Thomas J. Kemper 825 N.E. Multnomah St., Ste. 775 Portland, OR 97232
Assistant Secretary	Lenore M. Martin 825 N.E. Multnomah St., Ste. 775 Portland, OR 97232
Assistant Secretary	J.T. Pendergraft 825 N.E. Multnomah St., Ste. 775 Portland, OR 97232
Assistant Secretary	Gary R. Barnum 825 N.E. Multnomah St., Ste. 775 Portland, OR 97232