

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000073337

Entity Name: SAH 99 FUND I MM, INC.

FILED  
Apr 27, 2007  
Secretary of State

## Current Principal Place of Business:

6420 SW MACADAM  
SUITE 100  
PORTLAND, OR 97239

## New Principal Place of Business:

## Current Mailing Address:

6420 SW MACADAM  
SUITE 100  
PORTLAND, OR 97239

## New Mailing Address:

FEI Number: 65-0858507      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
C/O CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DC ( ) Delete  
Name: EMERY, RODNEY F  
Address: 6420 SW MACADAM, #100  
City-St-Zip: PORTLAND, OR 97239

Title: P ( ) Delete  
Name: WINNING, R. KYLE  
Address: 6420 SW MACADAM, #100  
City-St-Zip: PORTLAND, OR 97239

Title: DS ( ) Delete  
Name: DEL RIO, ANA MARIE  
Address: 6420 SW MACADAM, #100  
City-St-Zip: PORTLAND, OR 97239

Title: DT ( ) Delete  
Name: DAVAR, DINESH  
Address: 6420 SW MACADAM, #100  
City-St-Zip: PORTLAND, OR 97239

Title: V ( ) Delete  
Name: HILBERT, CHRISTOPHER M  
Address: 6420 SW MACADAM, #100  
City-St-Zip: PORTLAND, OR 97239

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DINESH DAVAR

CFO

04/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date