

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S86297

FILED
Apr 21, 2004
Secretary of State

Entity Name: PHC PROPERTIES CORPORATION

Current Principal Place of Business:

825 NE MULTNOMAH STREET
SUITE 2000
PORTLAND, OR 97232 US

New Principal Place of Business:

825 NE MULTNOMAH STREET
SUITE 1800
PORTLAND, OR 97232 US

Current Mailing Address:

825 NE MULTNOMAH STREET
KRISTY TAYLOR, SUITE 1800
PORTLAND, OR 97232 US

New Mailing Address:

FEI Number: 93-1067588 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T 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: AS () Delete
Name: MARTIN, LARRY O
Address: 825 NE MULTNOMAH, SUITE 2000
City-St-Zip: PORTLAND, OR 97232

Title: DP () Delete
Name: WILLIAMS, BRUCE N
Address: 825 NE MULTNOMAH, SUITE 2000
City-St-Zip: PORTLAND, OR 97232

Title: S () Delete
Name: HALLER, ANDREW P
Address: 825 NE MULTNOMAH, STE 2000
City-St-Zip: PORTLAND, OR 97232

Title: AT () Delete
Name: SACKS, TANYA
Address: 825 NE MULTNOMAH, STE 2000
City-St-Zip: PORTLAND, OR 97232

Title: AS () Delete
Name: ERB, JEFFERY B
Address: 825 NE MULTNOMAH, STE 1800
City-St-Zip: PORTLAND, OR 97232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: AS (X) Change () Addition
Name: MARTIN, LARRY O
Address: 825 NE MULTNOMAH, SUITE 1900
City-St-Zip: PORTLAND, OR 97232

Title: DP (X) Change () Addition
Name: WILLIAMS, BRUCE N
Address: 825 NE MULTNOMAH, SUITE 1900
City-St-Zip: PORTLAND, OR 97232

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

Title: AT (X) Change () Addition
Name: SACKS, TANYA
Address: 825 NE MULTNOMAH, STE 1900
City-St-Zip: PORTLAND, OR 97232

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JEFFERY B. ERB

AS

04/21/2004

Electronic Signature of Signing Officer or Director

_____ Date