

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S86297

FILED  
Apr 29, 2005  
Secretary of State

Entity Name: PHC PROPERTIES CORPORATION

## Current Principal Place of Business:

825 NE MULTNOMAH STREET  
SUITE 1800  
PORTLAND, OR 97232 US

## New Principal Place of Business:

825 NE MULTNOMAH  
SUITE 1800  
PORTLAND, OR 97232 US

## Current Mailing Address:

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

## New Mailing Address:

C/O OFFICE OF GENERAL COUNSEL  
825 NE MULTNOMAH, STE 1800  
PORTLAND, OR 97232 US

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 1900  
City-St-Zip: PORTLAND, OR 97232

Title: DP ( ) Delete  
Name: WILLIAMS, BRUCE N  
Address: 825 NE MULTNOMAH, SUITE 1900  
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 1900  
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: ( ) 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 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

04/29/2005

Electronic Signature of Signing Officer or Director

Date