

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003758

Entity Name: DENNIS UNIFORM MFG. CO.**Current Principal Place of Business:**714 N.E. HANCOCK STREET
PORTLAND, OR 97212**Current Mailing Address:**714 N.E. HANCOCK STREET
PORTLAND, OR 97212**FEI Number:** 93-0421020**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CASTIGLIONE, RONA
1101 N KELLER ROAD
SUITE G3
ORLANDO, FL 32810 US*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

Officer/Director Detail :

Title	P
Name	SHIPLEY, THOMAS
Address	645 NW SKYLINE BLVD
City-State-Zip:	PORTLAND OR 97229

Title	STVP
Name	NEES, GARY
Address	4711 NW HUSERIK DRIVE
City-State-Zip:	PORTLAND OR 97229

Title	C
Name	SHIPLEY, JOHN
Address	11670 SW LYNNRIDGE ROAD
City-State-Zip:	PORTLAND OR 97225

Title	VP
Name	ZINDEL, AL
Address	17421 UPPER CHERRY LANE
City-State-Zip:	LAKE OSWEGO OR 97034

Title	VP
Name	LANGLEY, BARBARA
Address	5021 SW BANCROFT ST.
City-State-Zip:	PORTLAND OR 97221

Title	VP
Name	SHIPLEY, JOAN
Address	11670 SW LYNNRIDGE ROAD
City-State-Zip:	PORTLAND OR 97225

I hereby 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 all other like empowered.

SIGNATURE: GARY NEES**CFO/SECRETARY****04/17/2014**

Electronic Signature of Signing Officer/Director Detail

Date