

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03000001028

**Entity Name:** CAN-AM COMMUNICATIONS, INC.

**Current Principal Place of Business:**

8602 MALTBY ROAD  
WOODINVILLE, WA 98072

**Current Mailing Address:**

11770 U.S. HIGHWAY 1,  
SUITE 101  
PALM BEACH GARDENS, FL 33408

**FEI Number:** 02-0413153

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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           TREASURER  
Name           DEFERRARI, H. ANDREW  
Address        11770 U.S. HIGHWAY 1, SUITE 101  
City-State-Zip: PALM BEACH GARDENS FL 33408

Title           P  
Name           GEPFORD, J. MICHAEL  
Address        8602 MALTBY ROAD  
City-State-Zip: WOODINVILLE WA 98072

Title           VP  
Name           ROSENOW, RICHARD  
Address        8602 MALTBY ROAD  
City-State-Zip: WOODINVILLE WA 98072

Title           S  
Name           VILSOET, RICHARD B  
Address        11770 U.S. HIGHWAY 1, SUITE 101  
City-State-Zip: PALM BEACH GARDENS FL 33408

Title           CTRL  
Name           BARR, REBECCA  
Address        8602 MALTBY ROAD  
City-State-Zip: WOODINVILLE WA 98072

Title           VP  
Name           GRAVES, PAUL  
Address        8602 MALTBY ROAD  
City-State-Zip: WOODINVILLE WA 98072

Title           VP  
Name           BURT, MICHAEL  
Address        8602 MALTBY ROAD  
City-State-Zip: WOODINVILLE WA 98072

Title           VP  
Name           LEMKE, JOHNNORA E.  
Address        8602 MALTBY ROAD  
City-State-Zip: WOODINVILLE WA 98072

**Continues on page 2**

*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:** RICHARD B. VILSOET

**SECRETARY**

**04/30/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title ASSISTANT TREASURER  
Name SNOW, JENNIFER S.  
Address 11770 U.S. HIGHWAY 1,  
SUITE 101  
City-State-Zip: PALM BEACH GARDENS FL 33408