

2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 17, 2014
Secretary of State
CC2420766932

Entity Name: TYONEK NATIVE CORPORATION

Current Principal Place of Business:

1689 C ST, STE 219
ANCHORAGE, AK 99501

Current Mailing Address:

1689 C ST, STE 219
ANCHORAGE, AK 99501

FEI Number: 92-0047626

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
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 P
Name STEPHAN, MICHAELENE
Address 1689 C ST, STE 219
City-State-Zip: ANCHORAGE AK 99501

Title VP
Name CONSTANTINE, LISA
Address 1689 C ST, STE 219
City-State-Zip: ANCHORAGE AK 99501

Title S
Name STEPHAN, CHARLENE
Address 1689 C ST, STE 219
City-State-Zip: ANCHORAGE AK 99501

Title T
Name STADIFER, JASON
Address 1689 C ST, STE 219
City-State-Zip: ANCHORAGE AK 99501

Title C
Name WILLIFORD, SHARON
Address 1689 C ST, STE 219
City-State-Zip: ANCHORAGE AK 99501

Title VC
Name MOON, SUSANNA L
Address 1689 C ST, STE 219
City-State-Zip: ANCHORAGE AK 99501

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: CHARLENE STEPHAN

SECRETARY

01/17/2014

Electronic Signature of Signing Officer/Director Detail

Date