2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000005404

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

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

Officer/Director Detail :

TitlePRESIDENTTitleVPNameSTEPHAN, MICHAELENENameCONSTANTINE, LISAAddress1689 C ST, STE 219Address1689 C ST, STE 219AddressANCHORAGE AK 99501City-State-ZipANCHORAGE AK 99501TitleSECRETARYTitleREASURER, ASST, SECRETARY, ASST, TREASURERNameMCCORD, EMIL JNameSTEPHAN, CHARLENEAddress1689 C ST, STE 219ANCHORAGE AK 995011689 C ST, STE 219City-State-ZipANCHORAGE AK 99501Title1689 C ST, STE 219TitleVCTitleSTANDIFER, JAISONNameWILLIFORD, SHARONNameSTANDIFER, JAISONAddress1689 C ST, STE 219ANCHORAGE AK 995011689 C ST, STE 219City-State-ZipANCHORAGE AK 99501TitleDIRECTORNameSTEPHAN, ROBERT JR.NameGARBER, BARTAddress1689 C ST, STE 219NameGARBER, BARTAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-ZipANCHORAGE AK 99501City-State-ZipANCHORAGE AK 99501	Onicentbilet						
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City-State-Zip:ANCHORAGE AK 99501City-State-Zip:ANCHORAGE AK 99501TitleSECRETARYTitleTREASURER, ASST. SECRETARY, ASST. TREASURERNameMCCORD, EMIL JNameSTEPHAN, CHARLENEAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-Zip:ANCHORAGE AK 99501City-State-Zip:ANCHORAGE AK 99501TitleVCTitleCHAIRMANNameWILLIFORD, SHARONNameSTANDIFER, JAISONAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-Zip:ANCHORAGE AK 99501TitleCHAIRMANNameWILLIFORD, SHARONNameSTANDIFER, JAISONAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-Zip:ANCHORAGE AK 99501City-State-Zip:ANCHORAGE AK 99501TitleDIRECTORTitleDIRECTORNameSTEPHAN, ROBERT JR.NameGARBER, BARTAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-Zip:ANCHORAGE AK 99501TitleDIRECTORNameSTEPHAN, ROBERT JR.NameGARBER, BARTAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-Zip:ANCHORAGE AK 99501TitleDIRECTORNameSTEPHAN, ROBERT JR.NameGARBER, BARTAddress1689 C ST, STE 219Address1689 C ST, STE 219	Name	STEPHAN, MICHAELENE	Name	CONSTANTINE, LISA			
TitleSECRETARYTitleTREASURER, ASST. SECRETARY, ASST. TREASURERNameMCCORD, EMIL JNameSTEPHAN, CHARLENEAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-Zip:ANCHORAGE AK 99501City-State-Zip:ANCHORAGE AK 99501TitleVCTitleCHAIRMANNameWILLIFORD, SHARONNameSTANDIFER, JAISONAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-Zip:ANCHORAGE AK 99501City-State-Zip:ANCHORAGE AK 99501TitleVCTitleCHAIRMANNameSTANDIFER, JAISONAddressAddress1689 C ST, STE 219Address1689 C ST, STE 219City-State-Zip:ANCHORAGE AK 99501City-State-Zip:ANCHORAGE AK 99501TitleDIRECTORTitleDIRECTORNameSTEPHAN, ROBERT JR.NameGARBER, BARTAddress1689 C ST, STE 219Address1689 C ST, STE 219City State Zip:ANCHORAGE AK 99501TitleDIRECTOR	Address	1689 C ST, STE 219	Address	1689 C ST, STE 219			
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Name STEPHAN, ROBERT JR. Name GARBER, BART Address 1689 C ST, STE 219 Address 1689 C ST, STE 219 City, State Zip; ANCHORAGE, AK, 99501 Address 1689 C ST, STE 219	Name Address	WILLIFORD, SHARON 1689 C ST, STE 219	Name Address	STANDIFER, JAISON 1689 C ST, STE 219			
	Name Address	STEPHAN, ROBERT JR. 1689 C ST, STE 219	Name Address	GARBER, BART 1689 C ST, STE 219			

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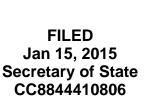
I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BART GARBER

DIRECTOR

01/15/2015

Electronic Signature of Signing Officer/Director Detail



Date

Certificate of Status Desired: No

Date

Officer/Director Detail Continued :

Title	CEO
Name	LOMBARDO, KEVIN
Address	1689 C ST, STE 219
City-State-Zip:	ANCHORAGE AK 99501