State	e of Rhode Island and Pro Office of the Secreta	
	Division Of Business 148 W. River S Providence RI 029	treet
HOPE	(401) 222-30	40
Foreign Business Corpo Annual Report Filing Period: January 1 - March		
	2-1501(e), each corporation failin ays after the time prescribed by a e of \$25.00.	
ANNUAL REPORT YEAR: 20	<u>17</u>	
1. Corporate ID No. 000	135888	
2. Name of Corporation \underline{WI}	ESTERN WOOD STRUCTUI	ES, INC.
3. Street Address Principal B	usiness Office:	
No. and Street: <u>20675 SV</u> City or Town: <u>TUALAT</u>	<u>V 105TH STREET</u> <u>'IN</u> Sta	te: <u>OR</u> Zip: <u>97062</u> Country: <u>USA</u>
4. Business Phone No.		
<u>5036906900</u>		
5. State of Incorporation		
State: <u>OR</u>		
	ARTICLE III	
Using the following NAICS cod	les, please select the code that t	est describes your business.
NAICS Code		<u>6</u> <u>321214</u>
6. Brief Description of the Ch	naracter of Business Conducte	d in Rhode Island
SALE OF ENGINEERED V	VOOD PRODUCTS	
7. Names and Addresses of t	he Officers and Directors:	
All officers and directors r	nust be listed.	
Title	Individual Name	Address
PRESIDENT	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
		14237 SW MCKINLEY DRIVE SHERWOOD, OR 97140 USA
VICE PRESIDENT	PAUL C GILHAM	13670 NW LAIDLAW RD PORTLAND, OR 97229 USA

hares Authorized	l and Issue	d			
Class of Stoc	:k	Series of Stock	Par Value Per Share	Total Authorized Shares Number of Shares	Total Issu and Outstand <i>Num of</i> <i>Shares</i>
CNP			\$0.0000	5,000.00	477

Signed this 23 Day of March, 2017 at 12:30:21 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By STEPHEN A TURNER

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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