

SCC eFile

2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

213561346

1.) CORPORATION NAME:

**Pacific Northern Environmental Corp.**

DUE DATE: **5/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER  
16TH FLOOR, 1111 EAST MAIN STREET**

SCC ID NO: **F1469727**

**RICHMOND, VA 23219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1121 COLUMBIA BLVD

CITY/ST/ZIP: LONGVIEW, WA 98632

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: JOHN W PARTRIDGE  OFFICER  DIRECTOR  
 TITLE: PRESIDENT  
 ADDRESS: 1121 COLUMBIA BLVD  
 CITY/ST/ZIP/CO: LONGVIEW, WA 98632

NAME: Todd Partridge  OFFICER  DIRECTOR  
 TITLE: VICE PRESIDENT  
 ADDRESS: 1121 COLUMBIA BLVD  
 CITY/ST/ZIP/CO: LONGVIEW, WA 98632

NAME: John Birrell  OFFICER  DIRECTOR  
 TITLE: CFO  
 ADDRESS: 1121 COLUMBIA BLVD  
 CITY/ST/ZIP/CO: LONGVIEW, WA 98632

NAME: VICKIE V PARTRIDGE  OFFICER  DIRECTOR  
 TITLE: SECRETARY  
 ADDRESS: 1121 COLUMBIA BLVD  
 CITY/ST/ZIP/CO: LONGVIEW, WA 98632

NAME: WILLIAM B WILSON  OFFICER  DIRECTOR  
 TITLE: DIRECTOR  
 ADDRESS: 3014 LAUREL RD  
 CITY/ST/ZIP/CO: LONGVIEW, WA 98632

NAME: Gary Healea  OFFICER  DIRECTOR  
 TITLE: DIRECTOR  
 ADDRESS: 1121 Columbia Blvd  
 CITY/ST/ZIP/CO: Longview, WA 98632

NAME: Dirk Barram TITLE: DIRECTOR ADDRESS: 17169 SW Stellar Dr CITY/ST/ZIP/CO: Sherwood, OR 97140	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Larry Peterson TITLE: DIRECTOR ADDRESS: 605 Peardale Lane #16 CITY/ST/ZIP/CO: Longview, WA 98632	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Ruth Bennett TITLE: DIRECTOR ADDRESS: 3315 SE Riverwood Ct CITY/ST/ZIP/CO: Vancouver, WA 98683	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: David Bristol TITLE: DIRECTOR ADDRESS: 14611 SE Rivercrest Dr CITY/ST/ZIP/CO: Vancouver, WA 98683	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ JOHN W PARTRIDGE	JOHN W PARTRIDGE, PRESIDENT	3/14/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		