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COMMONWEALTH OF KENTUCKY  
TREY GRAYSON, SECRETARY OF STATE  
ANNUAL REPORT  
DUE JUNE 30, 2008



0642086

ORGANIZATION ID # **0642086** STATE OR COUNTRY OF INCORPORATION **OR** ORGANIZATION DATE **07/05/2006** FILING FEE **\$15.00**

(1) EXACT CORPORATE NAME AND CURRENT PRINCIPAL OFFICE ADDRESS  
Changes made to the principal office address cannot be made on this form. Check (3)A to request a form to be mailed or download the form from our web site

BDN MANAGEMENT CORP.  
2260 MCGILCHRIST ST SE  
SALEM, OR 97302

**RECEIVED**  
MAR 20 2008  
SECRETARY OF STATE  
COMMONWEALTH OF KY

(2) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADDRESS  
Changes made to the registered agent or registered office cannot be made on this form. Complete (3) to request a form to be mailed or download form from web site.

(3) A.  Statement of Change of Designated or Principal Office Address Form  
B.  Statement of Change of Registered Agent or Registered Office Form  
MAIL FORM TO

C T CORPORATION SYSTEM  
KENTUCKY HOME LIFE BUILDING  
LOUISVILLE, KY 40202

[Empty box for mail form to]

(4) PRINCIPAL OFFICERS If (5) is blank, type or print the names and business addresses of the current principal officers. If sole officer, please note. The annual report will be returned if business addresses are not listed. If the corporation has previously filed an annual report, verify the names and titles of officers listed below. Please note any additions to or changes in the principal officers and give the business address for each person listed.

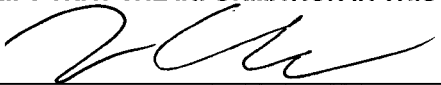
President	WILLIAM E COLSON	Norman L Brenden	9310 NE Vancouver Mall Dr.
Vice President	PATRICK F KENNEDY		Vancouver WA 98662
Secretary	BRUCE D THURN	Judice A Wells	" "
Treasurer	NORMAN L BRENDEN		" "

(5) DIRECTORS Type or print the names and business addresses of the corporation's directors. No listing of directors is verification that the corporation has dispensed with directors (KRS 271B.8-010(3)). Nonprofit corporations must list three (3) or more directors (KRS 273.211). The annual report will be returned if business addresses are not listed.

Name	WILLIAM E COLSON	Address	
Name	DANIEL R BATY	Address	5151 Elliott Ave Seattle WA 98121
Name	NORMAN L BRENDER Brenden	Address	9310 NE Vancouver Mall Dr Vancouver WA
Name	Patrick F Kennedy	Address	" "
Name		Address	

(6) Check here if you are a cooperative corporation or association organized under KRS 272.   
Check here if you are a rural electric or rural telephone cooperative corporation organized under KRS 279.

I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

 Norman L Brenden President 7/21/08

Signature of Officer or Chairman of the Board      Type or Print Name      Title      Date

**ANNUAL REPORT AND FILING FEE**  
Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

**MAILING ADDRESS**  
Trey Grayson  
Secretary of State  
P O Box 1150  
Frankfort, KY 40602-1150

**OFFICE LOCATION**  
Secretary of State  
State Capitol, Room 154  
700 Capital Avenue  
Frankfort, KY 40601  
(502)-564-2848

**NOTE: P O Box 1150 is for annual report filings only.**