



Secretary of State
Corporation Division
255 Capitol Street NE, Suite 151
Salem, OR 97310-1327

Phone: (503) 986-2200
FAX: (503) 378-4381
sos.oregon.gov/business

2024 ANNUAL REPORT

Registry Number: 40553083

Date of Incorporation: 6/13/1994

Fee: \$50

Due Date: 7/13/2024

Type: DOMESTIC NONPROFIT CORPORATION

FILED: JUN 21, 2024
OREGON SECRETARY OF STATE



40553083-26296949

THE PORTLAND GARDEN CLUB...

RENANA

THE PORTLAND GARDEN CLUB FOUNDATION
1132 SW VISTA AVE
PORTLAND OR 97205

Name of Domestic Nonprofit Corporation

THE PORTLAND GARDEN CLUB FOUNDATION

Jurisdiction: OREGON

Non-Profit Type: PUBLIC BENEFIT

The following information is required by statute. Please complete the information below. If any of the information is incorrect, you can make changes on this form. Failure to submit this Annual Report and fee by the due date may result in inactivation on our records.

Registered Agent

LAURA WILEY
1132 SW VISTA AVE
PORTLAND, OR 97205

If the Registered Agent has changed, the new agent has consented to the appointment. Oregon street address required.

1) Type of Business SUPPORT FOR THE PORTLAND GARDEN CLUB AND CONSERVATION/EDUCATION TOWARDS THE...

2) Principal Place of Business (Address,city,state,zip)

1132 SW VISTA AVE
PORTLAND, OR 97205

3) Mailing Address (Address,city,state,zip)

1132 SW VISTA AVE
PORTLAND, OR 97205

4) President (Name & Address)

~~LINDA MORROW~~ Mary Richenstein
1132 SW VISTA AVE
PORTLAND, OR 97205

5) Secretary (Name & Address)

LAURA WILEY
1132 SW VISTA AVE
PORTLAND, OR 97205

Execution: I declare, under penalty of perjury, that this document does not fraudulently conceal, fraudulently obscure, fraudulently alter or otherwise misrepresent the identity of the person or any officers, directors, employees or agents of the corporation on behalf of which the person signs. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct, and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment or both.

6) Signature

Laura Wiley

7) Printed Name

LAURA WILEY

8) Date

6/5/24

9) Phone Number

503-726-9901

Make check payable to "Corporation Division" and mail completed form with payment to the address above.

Note: Filing fees may be paid with a major credit card. Submit the card number and expiration date on a separate page for your protection.