

# AMENDED ANNUAL REPORT



Corporation Division  
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**E-FILED**  
Jun 01, 2015  
**OREGON SECRETARY OF STATE**

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**REGISTRY NUMBER**

8095515

**REGISTRATION DATE**

06/22/1967

**BUSINESS NAME**

PSI CONVEYING GROUPS INC.

**BUSINESS ACTIVITY**

ENGINEERING OF MATERIAL HANDLING SYSTEMS BOTH PNEUMATIC AND MECHANICAL INCLUDING BELTS, SCREW, CHAIN.

**MAILING ADDRESS**

PO BOX 1589  
LAKE OSWEGO OR 97035 USA

**TYPE**

DOMESTIC BUSINESS CORPORATION

**PRIMARY PLACE OF BUSINESS**

18551 SW 65TH AVENUE  
SUITE B  
LAKE OSWEGO OR 97035 USA

**JURISDICTION**

OREGON

**REGISTERED AGENT**

JAMES E LIVESAY

32279 BOONES BEND ROAD  
WILSONVILLE OR 97070 USA

If the Registered Agent has changed, the new agent has consented to the appointment.

**PRESIDENT**

JAMES E LIVESAY

32279 SW BOONES BEND ROAD  
WILSONVILLE OR 97070 USA

**SECRETARY**

JAMES M LIVESAY

29640 SW LANCELOT LN  
WILSONVILLE OR 97070 USA



By my signature, I declare as an authorized authority, that 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.

By typing my name in the electronic signature field, I am agreeing to conduct business electronically with the State of Oregon. I understand that transactions and/or signatures in records may not be denied legal effect solely because they are conducted, executed, or prepared in electronic form and that if a law requires a record or signature to be in writing, an electronic record or signature satisfies that requirement.

**ELECTRONIC SIGNATURE**

**NAME**

JAMES M LIVESAY

**TITLE**

SECRETARY

**DATE SIGNED**

06-01-2015