## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 836095

(0)

Principal Place of Business  Mailing Address  KOLL REAL ESTATE GROUP, INC. 4343 YON KARIMAN AVENUE NEWPORT BEACH CA 8260  2. Principal Place of Business  2. Mailing Address  W. KOLL REAL ESTATE GROUP, INC. 4343 YON KARIMAN AVENUE NEWPORT BEACH CA 8260-2005  3. Date Incorporated or Qualified O3/19/1976  O2/13/1996  2. Principal Place of Business  2. Mailing Address  4. FEI Number Applied Not Applied State, Apt. W. etc  2. Suite, Apt. W. etc  2. Soute, Apt. W. etc.  2. Election Cempalgn Financing Trust Fund Contribution Added to Fee Require  City & State  2. Country 2. Selection Cempalgn Financing Trust Fund Contribution Added to Fee Principal Place of Status Desired Fee Require  3. Date Incorporated or Qualified O2/13/1996  Not Applied Not Applied Not Applied Set State  City & State  City & State  6. Election Cempalgn Financing Trust Fund Contribution Added to Fee Principal Place of Status Desired Fee Require Fee Require  10. Name and Address of New Registered Agent  THE PRENTICE-HALL CORPORATION SYSTEM, INC. 110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered agent.  SIGNATURE  SIGNATURE  SIGNATURE  3. Date Incorporation of Qualified O3/19/1976 O2/13/1996 O2/13/	For licable and display and di
4343 YON KARMAN AVENUE NEWPORT BEACH CA \$2680 Sections 607 0502 and 607 1508, Florida Statutes the above-hamed corporation's board of directors. I hereby accept the appointment as regis agent 1 cm familiar with, and accept the obligations of, Section 607 0505, Florida Statutes.  3. Date Incorporated or Qualified 02/13/1996  4. FEI Number Applied 5. Certificate of Status Desired 6. Election Campaign Financing 5. Certificate of Status Desired 6. Election Campaign Financing 5. Certificate of Status Desired 6. Election Campaign Financing 7. Section 6. Certificate of Status Desired 6. Election Campaign Financing 7. Section 6. Certificate of Status Desired 6. Election Campaign Financing 7. Section 6. Certificate of Status Desired 6. Election Campaign Financing 7. Section 6. Certificate 6. Election Campaign Financing 7. Section 6. Cert	icable inal i i i i i i i i i i i i i i i i i i i
3. Date Incorporated or Qualified Q3/19/1976  2. Principal Place of Business  2a. Mailing Address  4. FEI Number 35-0912947  Suite, Apt. #, etc  Suite, Apt. #, etc.  5. Certificate of Status Desired Fee Require  City & State  City & State  City & State  City & State  Country  Zip  Country  Zip  Country  Zip  Country  Added to Fee Florida Statuses  Priorida Statuses  Priorida Statuses  Name and Address of Current Registered Agent  THE PRENTICE-HALL CORPORATION SYSTEM, INC.  110 NORTH MAGNOLIA STREET  TALLAHASSEE FL 32301  81  City  City  Country  Applied  6. Election Campaign Financing Trust Fund Contribution  Fee Require  8. This corporation has liability for intangible tax under s. 199. Florida Statuses  Yes No  10. Name and Address of New Registered Agent  THE PRENTICE-HALL CORPORATION SYSTEM, INC.  110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301  82  Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registagent.  SIGNATURE	icable inal i i i i i i i i i i i i i i i i i i i
25 Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  City & State  Country  Zip  Zip  Country  Zip  Country  Zip  Country  B. This corporation has liability for intangible tax under s. 199. Florida Statutes  In Name and Address of New Registered Agent  THE PRENTICE-HALL CORPORATION SYSTEM, INC.  110 NORTH MAGNOLIA STREET  TALLAHASSEE FL 32301  B1 Name  Street Address (P.O. Box Number is Not Acceptable)  The previsions of Sections 607 0502 and 607 1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as regis agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes  SIGNATURE  SIGNATURE  Sinter Address (P.O. Box Number is board of directors. I hereby accept the appointment as regis	icable inal i i i i i i i i i i i i i i i i i i i
Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.	nnal j 3e s 332,
27 City & State  City & State  City & State  City & State  28 Country  29 Country  29 State  29 State  Proceeding a status Desired Status	) 3e s : : : : : : : : : : : : : : : : : :
City & State  Trust Fund Contribution  Added to Ferman Fund Fund Contribution  Added to Ferman Fund Fund Contribution  This corporation has tiability for intangible tax under s. 199. Florida Statutes  Yes No  No  Power and Address of New Registered Agent  The PRENTICE-HALL CORPORATION SYSTEM, INC.  110 NORTH MAGNOLIA STREET  TALLAHASSEE FL 32301  81 Name  Street Address (P.O. Box Number is Not Acceptable)  Tall Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE	s ) 032,
Zip Country Zip Country Zip Country Sip Country Sip Country Sip Country Sip Signature	032,
24 25 29 30 Florida Statutes Yes No  9. Name and Address of Current Registered Agent  THE PRENTICE-HALL CORPORATION SYSTEM, INC.  110 NORTH MAGNOLIA STREET TALLAHASSEE FL 32301  83  City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registagent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE	
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SIGNATURE	hare
SIGNATURE	3100
SIGNATURE	ļ
Signature, typed or procedinance of registered agent and title if applicable. (NOTE: Registered Agent (signature required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN DELETE 11 TIME D. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN DELETE 11 TIME D. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN DELETE 11 TIME D. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN DELETE 11 TIME D. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN D. ADDITIONS/CHANGES TO OFFICERS AND D. ADDITIONS/	2 Addition
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NAME   WIRTA, HAYMONU E   1.2 NAME   STREET ADDRESS   4343 VON KARMAN AVENUE   1.3 STREET ADDRESS	i
CHY-SI-ZIP NEWPORT BEACH CA 92660 1.4 CHY-SI-ZIP	1
	Addition
NAME ORTWEIN, RICHARD M 2.2 NAME	]
STREET ADDRESS 4343 VON KARMAN AVENUE 2.3 STREET ADDRESS	
NEWPORT BEACH CA 92880 2.4 CITY-ST-7IIP	
	Addition
NAME PACINI, RAYMOND J 32 NAME	
STREET ADDRESS CITY-S1-ZIP  4343 VON KARMAN AVENUE 3.3 STREET ADDRESS NEWPORT BEACH CA 92680 3.4. CITY-S1-ZIP	
	Addition
NAME SCIUTTO, SANDRA G 4.2 NAME	
STREET ADDRESS 4343 VON KARMAN AVENUE 4.3 STREET ADDRESS	
City-SI-ZIP NEWPORT BEACH CA 92660 4.4 CITY-SI-ZIP	
TITLE S DELETE 5.1 TITLE Change	Addition
NAME RUSH, CHRISTINE 5.2 NAME	
STREET ADDRESS 4343 VON KARMAN AVENUE 5.3 STREET ADDRESS	
CITY-ST-ZIP NEWPORT BEACH CA 92660 54 CITY-ST-ZIP	dalite
	Addition
NAME 6.2 NAME :	
STREET ADDRESS  CITY-ST-ZIP  64 CITY-ST-ZIP	}

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 spenanged, or on an attachment with an address.

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

67 833-304 Daysime Phone #

**FILED** 

Apr 28 1997 8:00am

Secretary of State