# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Jan 27, 2003 8:00 am**
**Secretary of State**
01-27-2003 90142 030 ***150.00

DOCUMENT # P22726

1. Entity Name
TWG, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 17000 E. HWY 120<br>RIPON CA 95366 | 17000 E. HWY 120<br>RIPON CA 95366 |

☐ CHECK HERE IF MAKING CHANGES

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number 94-2756233 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

| 6. Name and Address of Current Registered Agent | 7. Name and Address of New Registered Agent |
|---|---|
| BUCHMAN, ABRAHAM M.<br>5301 WOODLANDS BLVD.<br>TAMARAC FL 33319 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City **FL** Zip Code |

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2003 Fee will be $550.00**
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>CIOCCA, ARTHUR A.<br>#9 25TH AVENUE<br>SAN FRANCISCO CA | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | CD | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VCD<br>BATES, F. LYNN<br>5707 CHENAULT DR.<br>MODESTO, CA . | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 7566 St. Andrews<br>Rancho Sante Fe, CA 92067 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>JESSE, H. WILLIAM JR.<br>222 SUTTER ST.<br>SAN FRANCISCO CA | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 451 Jackson St., 3rd Floor<br>San Francisco, CA 94111-1615 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | S<br>FLOWERS, PAUL W.<br>3644 PORTSMOUTH CIR.S.<br>STOCKTON CA | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 3602 Gleneagles Drive<br>Stockton, CA 95219 | ☑ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V<br>QUACCIA, LOUIS M.<br>218 PATRICIA LANE<br>MODESTO CA | ☑ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P<br>David B. Kent<br>9639 Cedar Mountain<br>Livermore, CA 94550 | ☐ Change ☑ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VP<br>PAGE, JAMES C.<br>2021 CASA GRANDE COURT<br>MODESTO CA 95355 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | 3109 Colebrook Lane<br>Dublin, CA 94568 | ☑ Change ☐ Addition |

CR2E034 (10/02)

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** SIGNATURE James C Page, VP 1/16/03 209-599-0332
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #