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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 838458 (8)

1. Corporation Name

MARSHALL AND STEVENS INCORPORATED



Principal Place of Business

707 WILSHIRE BLVD
5200
LOS ANGELES CA 90017
US

Mailing Address

707 WILSHIRE BLVD
5200
LOS ANGELES CA 90017-3614
US

3. Date Incorporated or Qualified

05/19/1977

3a. Date of Last Report

05/01/1996

4. FEI Number

36-2919252

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 707 WILSHIRE BLVD

Suite, Apt. #, etc.

22 5200

City & State

23 Los Angeles CA

Zip

24 90017

Country

25 U.S.A.

2a. Mailing Address

26 707 WILSHIRE BLVD

Suite, Apt. #, etc.

27 5200

City & State

28 Los Angeles CA

Zip

29 90017

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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 office or 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 registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE VTS ☐ DELETE

NAME SANTARSIERO, M.W.
STREET ADDRESS 707 WILSHIRE BLVD 5200
CITY-ST-ZIP LOS ANGELES CA

TITLE VD ☐ DELETE

NAME ATKINS, MERLE
STREET ADDRESS 1700 MARKET STR #1510
CITY-ST-ZIP PHILADELPHIA PA

TITLE V ☐ DELETE

NAME VISCONTI, LOU
STREET ADDRESS 200 NO BROADWAY STE 1600
CITY-ST-ZIP ST LOUIS MO

TITLE PD ☐ DELETE

NAME KERSLAKE, R
STREET ADDRESS 707 WILSHIRE BLVD SUITE 5200
CITY-ST-ZIP LOS ANGELES CA

TITLE VPD ☐ DELETE

NAME THOMAS, FRED
STREET ADDRESS 707 WILSHIRE BLVD 5200
CITY-ST-ZIP LOS ANGELES CA

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 if changed or on an attachment with an address.

SIGNATURE

CR2E034 (9/96)