


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

**FILED**  
**Mar 01, 1999 8:00 am**  
**Secretary of State**

03-01-1999 90022 018 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 307876**

1. Corporation Name

**FINLEY INVESTMENT CO.**



Principal Place of Business <b>3069 E. CARRIGAN CANYON DR. SALT LAKE CITY UT 84109 US</b>	Mailing Address <b>P.O. BOX 58717 SALT LAKE CITY UT 84158-0717</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 1788 Hubbard Ave.</b>		2a. Mailing Address <b>26</b>		3. Date Incorporated or Qualified <b>08/03/1966</b>	
Suite, Apt. #, etc. <b>22</b>		Suite, Apt. #, etc. <b>27</b>		4. FEI Number <b>59-1224632</b>	
City & State <b>23 Salt Lake City, UT</b>		City & State <b>28</b>		Applied For Not Applicable	
Zip <b>24 84108</b>		Country <b>25 USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>29</b>		<b>30</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
				8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>HEINTZELMAN, VIRGINIA 2655 LAKE SHORE DR ORLANDO FL 32803</b>		10. Name and Address of New Registered Agent <b>81 Name</b> <b>82 Street Address (P.O. Box Number is Not Acceptable)</b> <b>83</b> <b>84 City</b> <b>FL</b> <b>85 Zip Code</b>	
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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 Virginia H. Heintzelman DATE 27 Jan 1999  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>HAMILTON, FINLEY M</b>		1.2 NAME	
STREET ADDRESS <b>3069 CARRIGAN CANYON DR.</b>		1.3 STREET ADDRESS	
CITY-ST-ZIP <b>SALT LAKE CITY UT</b>		1.4 CITY-ST-ZIP	
TITLE <b>PD</b>	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>PETERSON, MARILYN H</b>		2.2 NAME	
STREET ADDRESS <b>3069 E CARRIGAN CANYON DR.</b>		2.3 STREET ADDRESS	
CITY-ST-ZIP <b>SALT LAKE CITY UT</b>		2.4 CITY-ST-ZIP	
TITLE <b>S</b>	<input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>TOBLER, JENNIFER</b>		3.2 NAME	
STREET ADDRESS <b>3069 E CARRIGAN CANYON DR</b>		3.3 STREET ADDRESS	
CITY-ST-ZIP <b>SALT LAKE CITY UT</b>		3.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>LINTON, JANE H</b>		4.2 NAME	
STREET ADDRESS <b>2001 BROWNING AVE</b>		4.3 STREET ADDRESS	
CITY-ST-ZIP <b>SALT LAKE CITY UT 84018</b>		4.4 CITY-ST-ZIP	
TITLE <b>D</b>	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME <b>IVANCOVICH, JOYCE H</b>		5.2 NAME	
STREET ADDRESS <b>342 RUMA RANCHO AVE</b>		5.3 STREET ADDRESS	
CITY-ST-ZIP <b>PORTERVILLE CA 93257</b>		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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, with all other like empowered.

SIGNATURE: Jennifer Tobler **FILED** 1/6/99 801-487-4048  
Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (11/98)