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Secretary of State

04-06-1999 90030 036 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 595322

1. Corporation Name

OCEANSIDE COMMUNITIES, INC.

Principal Place of Business

414 N. CENTRAL AVE.  
GLENDALE CA 91203  
US

Mailing Address

P.O. BOX 1709  
M726  
GLENDALE CA 91203  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/20/1978

4. FEI Number

59-1860724

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 135 MAIN STREET

Suite, Apt. #, etc.

22 4TH FLR.

City & State

23 SAN FRANCISCO, CA

Zip

Country

24 94105

25

2a. Mailing Address

26 135 MAIN ST.

Suite, Apt. #, etc.

27 4TH FLR.

City & State

28 SAN FRANCISCO, CA

Zip

Country

29 94105

30

9. Name and Address of Current Registered Agent

WEISS, SUZANNE  
115 S.E. 13TH ST., SUITE C  
FT. LAUDERDALE FL 33316

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 DP ☐ DELETE

NAME HESS, TERRY D  
STREET ADDRESS 414 N. CENTRAL AVE.  
CITY-ST-ZIP GLENDALE CA 91203

TITLE S ☐ DELETE

NAME ELLER, J.R. JR.  
STREET ADDRESS 401 N. BRAND BLVD., M-726  
CITY-ST-ZIP GLENDALE CA 91203

TITLE DT ☐ DELETE

NAME HAYNES, JOHN E  
STREET ADDRESS 414 N. CENTRAL AVE.  
CITY-ST-ZIP GLENDALE CA 91203

TITLE D ☐ DELETE

NAME FINK, RICHARD A  
STREET ADDRESS 414 N. CENTRAL AVE.  
CITY-ST-ZIP GLENDALE CA 91203

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition

1.2 NAME JAMES P. MURRAY  
1.3 STREET ADDRESS 135 MAIN ST.  
1.4 CITY-ST-ZIP SAN FRANCISCO, CA 94105

2.1 TITLE SECRETARY ☒ Change ☐ Addition

2.2 NAME NANESSA L. WASHINGTON  
2.3 STREET ADDRESS 135 MAIN ST.  
2.4 CITY-ST-ZIP SAN FRANCISCO, CA 94105

3.1 TITLE DIRECTOR ☒ Change ☐ Addition

3.2 NAME ERIC K. KANAWARA  
3.3 STREET ADDRESS 135 MAIN ST.  
3.4 CITY-ST-ZIP SAN FRANCISCO, CA 94105

4.1 TITLE DIRECTOR ☒ Change ☐ Addition

4.2 NAME BLAKENEY A. BOBBITT  
4.3 STREET ADDRESS 135 MAIN ST.  
4.4 CITY-ST-ZIP SAN FRANCISCO, CA 94105

5.1 TITLE ASSISTANT SECRETARY ☐ Change ☒ Addition

5.2 NAME MERINDA F. PRATER  
5.3 STREET ADDRESS 135 MAIN ST.  
5.4 CITY-ST-ZIP SAN FRANCISCO, CA 94105

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
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:

Merinda F. Prater MERINDA F. PRATER 3/16/99 (415) 904-4634

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2F034 (11/98)