



Mar 04 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS		Mar 04 1997 8:00am Secretary of State	
DOCUMENT # <b>662226</b> (0) 1. Corporation Name <b>GLENFED PROPERTIES, INC.</b>					
Principal Place of Business <b>414 N. CENTRAL AVE. GLENDALE CA 91203 US</b>		Mailing Address <b>P.O. BOX 1709 M-726 GLENDALE CA 91209-1709 US</b>		3. Date Incorporated or Qualified <b>04/28/1980</b> 3a. Date of Last Report <b>02/14/1996</b>	
2. Principal Place of Business <b>21</b> Suite, Apt #, etc. <b>22</b> City & State <b>23</b> Zip Country <b>24</b>		2a. Mailing Address <b>26</b> Suite, Apt #, etc. <b>27</b> City & State <b>28</b> Zip Country <b>29</b>		4. FEI Number <b>59-1998504</b> 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>WEISS, SUZANNE 115 SE 13TH ST., SUITE C 7TH FLOOR FT. LAUDERDALE FL 33316</b>				10. Name and Address of New Registered Agent <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS 1.1 TITLE <b>CCEO</b> <input type="checkbox"/> DELETE 1.2 NAME <b>HESS, TERRY D.</b> 1.3 STREET ADDRESS <b>121 W LEXINGTON DRIVE</b> 1.4 CITY-ST-ZIP <b>GLENDALE CA</b> 2.1 TITLE <b>EVPD</b> <input type="checkbox"/> DELETE 2.2 NAME <b>BARROR, M. F</b> 2.3 STREET ADDRESS <b>121 W LEXINGTON DRIVE</b> 2.4 CITY-ST-ZIP <b>GLENDALE CA</b> 3.1 TITLE <b>S</b> <input type="checkbox"/> DELETE 3.2 NAME <b>ELLER, JAMES R. JR</b> 3.3 STREET ADDRESS <b>401 N BRAND BLVD 726</b> 3.4 CITY-ST-ZIP <b>GLENDALE CA</b> 4.1 TITLE <b>VD</b> <input type="checkbox"/> DELETE 4.2 NAME <b>HAYNES, J. E</b> 4.3 STREET ADDRESS <b>414 N. CENTRAL AVE.</b> 4.4 CITY-ST-ZIP <b>GLENDALE CA</b> 5.1 TITLE <b>AS</b> <input type="checkbox"/> DELETE 5.2 NAME <b>PAGE, DOROTHY</b> 5.3 STREET ADDRESS <b>401 N. BRAND BLVD., M-726</b> 5.4 CITY-ST-ZIP <b>GLENDALE CA</b> 6.1 TITLE <input type="checkbox"/> DELETE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 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: <b>James R. Eller</b> <b>2/27/97 (818) 520-2404</b>					