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Apr 06, 1999 8:00 am  
Secretary of State

04-06-1999 90030 034 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # 662226

1. Corporation Name

GLENFED PROPERTIES, INC.

Principal Place of Business

414 N. CENTRAL AVE.  
GLENDALE CA 91203  
US

Mailing Address

P.O. BOX 1709  
M-726  
GLENDALE CA 91203  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/28/1980

4. FEI Number

59-1998504

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$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 ST.

2a. Mailing Address

26 135 MAIN ST. PRATER

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 4TH FLR.

27 4TH FLR.

City & State

23 SAN FRANCISCO, CA

City & State

28 SAN FRANCISCO,

Zip Country

24 94105

25

Zip Country

29 CA

30

9. Name and Address of Current Registered Agent

WEISS, SUZANNE  
115 SE 13TH ST., SUITE C  
7TH FLOOR  
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 CCEO ☐ DELETE

NAME HESS, TERRY D.  
STREET ADDRESS 121 W LEXINGTON DRIVE  
CITY-ST-ZIP GLENDALE CA

TITLE S ☐ DELETE

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

TITLE VD ☐ DELETE

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

TITLE AS ☐ DELETE

NAME PAGE, DOROTHY  
STREET ADDRESS 401 N. BRAND BLVD., M-726  
CITY-ST-ZIP GLENDALE CA

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 ☒ Change ☐ Addition

1.2 NAME PRESIDENT  
1.3 STREET ADDRESS LACY G. NEWMAN  
1.4 CITY-ST-ZIP 135 MAIN ST.  
SAN FRANCISCO, CA 94105

2.1 TITLE ☒ Change ☐ Addition

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

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME SENIOR VICE PRESIDENT  
3.3 STREET ADDRESS PENELOPE N. TULEI  
3.4 CITY-ST-ZIP 135 MAIN ST.  
SAN FRANCISCO, CA 94105

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME ASSISTANT SECRETARY  
4.3 STREET ADDRESS MERINDA F. PRATER  
4.4 CITY-ST-ZIP 135 MAIN ST.  
SAN FRANCISCO, CA 94105

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME ASSISTANT SECRETARY  
5.3 STREET ADDRESS BLAKENEY A. BOBBITT  
5.4 CITY-ST-ZIP 135 MAIN ST.  
SAN FRANCISCO, CA 94105

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME VICE PRESIDENT  
6.3 STREET ADDRESS JAMES P. MURRAY  
6.4 CITY-ST-ZIP 135 MAIN ST.  
SAN FRANCISCO, CA 94105

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 3/10/99 (415) 904-4634

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)