

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 818558

FILED
Jan 06, 2009
Secretary of State

Entity Name: CLEVELAND WRECKING COMPANY

Current Principal Place of Business:

600 MONTGOMERY STREET
25TH FLOOR
SAN FRANCISCO, CA 94111

New Principal Place of Business:

Current Mailing Address:

600 MONTGOMERY STREET
25TH FLOOR
SAN FRANCISCO, CA 94111

New Mailing Address:

FEI Number: 31-0244320 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SHERIDAN, JAMES P
Address: 628 EAST EDNA PLACE
City-St-Zip: COVINA, CA 91723

Title: VTD () Delete
Name: ARMSTRONG, RITA
Address: 600 MONTGOMERY ST., 25TH FLOOR
City-St-Zip: SAN FRANCISCO, CA 94111

Title: V () Delete
Name: FUGATE, WILLIAM
Address: 628 EAST EDNA PLACE
City-St-Zip: COVINA, CA 91723

Title: S (X) Delete
Name: MOORE, JOSEPH F
Address: 600 MONTGOMERY ST., 25TH FLOOR
City-St-Zip: SAN FRANCISCO, CA 94111

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDT (X) Change () Addition
Name: SHERIDAN, JAMES P
Address: 628 EAST EDNA PLACE
City-St-Zip: COVINA, CA 91723

Title: VS (X) Change () Addition
Name: FUGATE, WILLIAM S
Address: 628 EAST EDNA PLACE
City-St-Zip: COVINA, CA 91723

Title: D (X) Change () Addition
Name: ARMSTRONG, RITA
Address: 600 MONTGOMERY ST., 25TH FLOOR
City-St-Zip: SAN FRANCISCO, CA 94111

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RITA ARMSTRONG

D

01/06/2009

Electronic Signature of Signing Officer or Director

_____ Date