

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 30 1998 8:00am
Secretary of State

DOCUMENT # **828149** (5)

1. Corporation Name
DANIEL, MANN, JOHNSON, & MENDENHALL

Principal Place of Business

**3250 WILSHIRE BLVD
LOS ANGELES CA 90010**

Mailing Address

**3250 WILSHIRE BLVD
LOS ANGELES CA 90010**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/14/1972

4. FEI Number

95-2084998

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
660 EAST JEFFERSON STREET
TALLAHASSEE FL 32301**

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

OFFICERS AND DIRECTORS

| | | |
|----------------|--------------------------|--|
| 12. TITLE | VP | <input checked="" type="checkbox"/> DELETE |
| NAME | AGOPOVICH, MOSES B | |
| STREET ADDRESS | 275 W HOSPITALITY LN 314 | |
| CITY-ST-ZIP | SAN BERNARDINO CA | |
| TITLE | D | <input type="checkbox"/> DELETE |
| NAME | HOLDSWORTH, RAYMOND W. | |
| STREET ADDRESS | 3250 WILSHIRE BOULEVARD | |
| CITY-ST-ZIP | LOS ANGELES CA | |
| TITLE | VP | <input type="checkbox"/> DELETE |
| NAME | BUTLER, GILBERT | |
| STREET ADDRESS | 3250 WILSHIRE BLVD | |
| CITY-ST-ZIP | LOS ANGELES CA | |
| TITLE | AP | <input type="checkbox"/> DELETE |
| NAME | BERNSTEIN, MORTON A | |
| STREET ADDRESS | 300 W CLARENDON, STE 400 | |
| CITY-ST-ZIP | PHOENIX AZ | |
| TITLE | SDV | <input type="checkbox"/> DELETE |
| NAME | LAMBECK, DEBRA T | |
| STREET ADDRESS | 3250 WILSHIRE BLVD | |
| CITY-ST-ZIP | LOS ANGELES CA | |
| TITLE | | <input type="checkbox"/> DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

| | |
|---|--|
| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 1.1 TITLE | VP |
| 1.2 NAME | Shapiro, Allan |
| 1.3 STREET ADDRESS | 3250 Wilshire Boulevard |
| 1.4 CITY-ST-ZIP | Los Angeles, CA 90010 |
| 2.1 TITLE | P/C/D |
| 2.2 NAME | |
| 2.3 STREET ADDRESS | |
| 2.4 CITY-ST-ZIP | |
| 3.1 TITLE | |
| 3.2 NAME | |
| 3.3 STREET ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | |
| 4.2 NAME | |
| 4.3 STREET ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | |
| 5.2 NAME | |
| 5.3 STREET ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | |
| 6.2 NAME | |
| 6.3 STREET ADDRESS | |
| 6.4 CITY-ST-ZIP | |

Please see attached sheets for
additional officers

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.

SIGNATURE:

[Signature] 9/30/98

(213)381-3663

CR2E034 (5/98)