

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

FILED
Mar 15 1996 8:00 am
Secretary of State

DOCUMENT # 847812 (5)

1. Corporation Name

SECURITY PACIFIC FINANCIAL SERVICES INC.

Principal Place of Business

10089 WILLOW CREEK ROAD
SAN DIEGO CA 92131

Mailing Address

10089 WILLOW CREEK ROAD.
#24400
SAN DIEGO CA 92131
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

3. Date Incorporated or Qualified

12/31/1980

3a. Date of Last Report

04/26/1995

4. FEI Number

95-2893741

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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 PD ☐ DELETE

NAME WILSON, FAYE M
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY-ST-ZIP SAN DIEGO CA

TITLE D ☐ DELETE

NAME GUNN, GERALD M
STREET ADDRESS 555 CALIFORNIA ST
CITY-ST-ZIP SAN FRANCISCO CA

TITLE D ☐ DELETE

NAME JONES, JAMES G
STREET ADDRESS 555 CALIFORNIA ST.
CITY-ST-ZIP SAN FRANCISCO CA

TITLE T ☐ DELETE

NAME WILLIAMS, CAMERON E
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY-ST-ZIP SAN DIEGO CA

TITLE V ☐ DELETE

NAME CHAN-SHAFFER, CLAUDIA
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY-ST-ZIP SAN DIEGO CA

TITLE S ☐ DELETE

NAME SOROKIN, CHERYL A
STREET ADDRESS 555 CALIFORNIA ST.
CITY-ST-ZIP SAN FRANCISCO CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Claudia Chan-Shaffer

Claudia Chan-Shaffer, Senior Vice President 2/27/96 (619) 530-9539

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone: #

CR2E034 (12/95)