
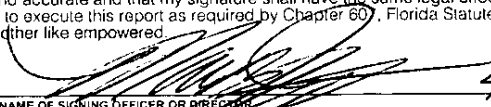


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2007 8:00 am
Secretary of State

05-08-2007 90011 042 ***150.00

DOCUMENT # 851255 1. Entity Name UDC ADVISORY SERVICES, INC.					
Principal Place of Business 655 BREA CANYON ROAD WALNUT, CA 91789			Mailing Address 655 BREA CANYON ROAD WALNUT, CA 91789		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 36-2930318	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent NRAI SERVICES, INC. 2731 EXECUTIVE PARK DRIVE SUITE 4 WESTON, FL 33331				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEA, JOHN F 655 BREA CANYON ROAD WALNUT, CA 917890489	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/S Shontere, James G. 655 Brea Canyon Road Walnut CA 91789
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Morrissey, John C. 655 Brea Canyon Road Walnut CA 91789	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Shea, Peter O. 655 Brea Canyon Road Walnut CA 91789	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SHONTERE, JAMES G 655 BREA CANYON ROAD WALNUT, CA 917890489	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SELVA, BERT 655 BREA CANYON RD WALNUT, CA 91789	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LAKEY, RONALD L 655 BREA CANYON ROAD WALNUT, CA 917890489	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: Max B. Johnson  4/18/07 (909) 594-9500 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

40108059



04172007 Chg-P CR2E034 (12/06)

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 851255

1. Entity Name
UDC ADVISORY SERVICES, INC.



ATTACHMENT

40108059

Principal Place of Business
655 BREA CANYON ROAD
WALNUT, CA 91789

Mailing Address
655 BREA CANYON ROAD
WALNUT, CA 91789

2. Principal Place of Business - No P.O. Box #
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

04172007 Chg-P CR2E034 (12/06)

4. FEI Number
36-2930318

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
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Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input type="checkbox"/> Delete	TITLE	D/S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHEA, JOHN F		NAME	Shontere, James G.	
STREET ADDRESS	655 BREA CANYON ROAD		STREET ADDRESS	655 Brea Canyon Road	
CITY-ST-ZIP	WALNUT, CA 917890489		CITY-ST-ZIP	Walnut CA 91789	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHEA, EDMUND H JR		NAME	Morrissey, John C.	
STREET ADDRESS	655 BREA CANYON ROAD		STREET ADDRESS	655 Brea Canyon Road	
CITY-ST-ZIP	WALNUT, CA 917890489		CITY-ST-ZIP	Walnut CA 91789	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHEA, PETER O JR.		NAME	Shea, Peter O.	
STREET ADDRESS	655 BREA CANYON ROAD		STREET ADDRESS	655 Brea Canyon Road	
CITY-ST-ZIP	WALNUT, CA 917890489		CITY-ST-ZIP	Walnut CA 91789	
TITLE	S	<input type="checkbox"/> Delete	TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SHONTERE, JAMES G		NAME	Johnson, Max B.	
STREET ADDRESS	655 BREA CANYON ROAD		STREET ADDRESS	655 Brea Canyon Road	
CITY-ST-ZIP	WALNUT, CA 917890489		CITY-ST-ZIP	Walnut CA 91789	
TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SELVA, BERT		NAME		
STREET ADDRESS	655 BREA CANYON RD		STREET ADDRESS		
CITY-ST-ZIP	WALNUT, CA 91789		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAKEY, RONALD L		NAME		
STREET ADDRESS	655 BREA CANYON ROAD		STREET ADDRESS		
CITY-ST-ZIP	WALNUT, CA 917890489		CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Max B. Johnson 4/18/07 (909) 594-9500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

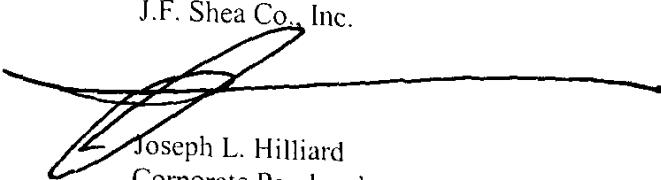
ATTACHMENT 40108059

#857255

Should you have any comments or concerns, please feel free to contact me. My direct number is (909) 444-0698.

Sincerely yours,

J.F. Shea Co., Inc.



Joseph L. Hilliard
Corporate Paralegal

Attachments

J.F. Shea Co., Inc.