

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2004 8:00 am
Secretary of State

06-02-2004 90001 032 ***150.00

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1. Entity Name
GEOMATRIX CONSULTANTS, INC.



Principal Place of Business
**2101 WEBSTER STREET, SUITE 1200
OAKLAND, CA 94612**

Mailing Address
**2101 WEBSTER STREET, SUITE 1200
OAKLAND, CA 94612**

54056319



05052004 Chg-P CR2E034 (10/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

94-2934407

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **CV** ☐ Delete
NAME **EMBREE, JAMES**
STREET ADDRESS **620 COOLIDGE DR, SUITE 185**
CITY-ST- ZIP **FOLSOM, CA 95630**

TITLE **PD** ☐ Delete
NAME **DAUS, ANTHONY III**
STREET ADDRESS **2101 WEBSTER STREET, SUITE 1200**
CITY-ST- ZIP **OAKLAND, CA 94612**

TITLE **CFOV** ☐ Delete
NAME **PRICE, JAMES C**
STREET ADDRESS **2101 WEBSTER ST, SUITE 1200**
CITY-ST- ZIP **OAKLAND, CA 94612**

TITLE **S** ☒ Delete
NAME **JONES, ALLISON**
STREET ADDRESS **2101 WEBSTER STREET, SUITE 1200**
CITY-ST- ZIP **OAKLAND, CA 94612**

TITLE **D** ☐ Delete
NAME **WARNER, SCOTT**
STREET ADDRESS **2101 WEBSTER ST. SUITE 1200**
CITY-ST- ZIP **OAKLAND, CA 94612**

TITLE **DV** ☒ Delete
NAME **MAKDISI, FAIZ**
STREET ADDRESS **2101 WEBSTER ST., STE 1200**
CITY-ST- ZIP **OAKLAND, CA 94612**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST- ZIP

TITLE ☐ Change ☒ Addition
NAME **S JENNI, KAREN**
STREET ADDRESS **1401 - 17TH ST., STE 600**
CITY-ST- ZIP **DENVER, CO 80202**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST- ZIP

TITLE ☐ Change ☒ Addition
NAME **D SHEAHAN, N. THOMAS**
STREET ADDRESS **330 W. BAY ST., STE 140**
CITY-ST- ZIP **COSTA MESA, CA 92627**

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MAY 7, 2004

Date

510-663-4100

Daytime Phone #