

**FILED**  
**Mar 10, 2003 8:00 am**  
**Secretary of State**

03-10-2003 90783 036 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F01000006347

1. Entity Name  
DSW & ASSOCIATES, INC.



Principal Place of Business  
24500 CLAWITER ROAD  
HAYWARD CA 94545

Mailing Address  
24500 CLAWITER ROAD  
HAYWARD CA 94545

10000010



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

77-0107351

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525

Name **RICHARD SUSERMAN**

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named party 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 of person or persons registered agent and title if applicable

**CONTROLLER**

(NOTE: Registered Agent signature required when reinstating)

2/3/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE CP  
NAME BABBINGTON, T. AL  
STREET ADDRESS 24500 CLAWITER ROAD  
CITY- ST- ZIP HAYWARD CA 94545 ☒ Delete

TITLE ST  
NAME NAZARENUS, ROBERT  
STREET ADDRESS 24500 CLAWITER ROAD  
CITY- ST- ZIP HAYWARD CA 94545 ☒ Delete

TITLE D  
NAME PRICE, TOM  
STREET ADDRESS 24500 CLAWITER ROAD  
CITY- ST- ZIP HAYWARD CA 94545 ☐ Delete

TITLE D  
NAME CHAPES, JEAN-MARC  
STREET ADDRESS 24500 CLAWITER ROAD  
CITY- ST- ZIP HAYWARD CA 94545 ☐ Delete

TITLE CEO  
NAME KURT OLNHAUSEN  
STREET ADDRESS 24500 CLAWITER ROAD  
CITY- ST- ZIP HAYWARD, CA 94545 ☐ Delete

TITLE CFO  
NAME RICHARD SUSERMAN  
STREET ADDRESS 24500 CLAWITER ROAD  
CITY- ST- ZIP HAYWARD, CA 94545 ☐ Delete

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

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

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STREET ADDRESS  
CITY- ST- ZIP ☐ Change ☐ Addition

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

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 REQUIRED**

2/3/03

510-723-4815

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (10/02)