


2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90050 007 ***150.00

DOCUMENT # F02000001565 1. Entity Name MJB ACQUISITION CORPORATION					
Principal Place of Business 6 HUTTON CTR DR. STE 400 SANTA ANA CA 92707			Mailing Address 6 HUTTON CTR DR. STE 400 SANTA ANA CA 92707		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
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 <div style="text-align: right;"> FL Zip Code </div>		
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)</small> <div style="float: right;">DATE _____</div>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State			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	CCEO MOORE, DAVID G <input type="checkbox"/> Delete 6 HUTTON CENTRE DRIVE SUITE 400 SANTA ANA CA 92707		TITLE NAME STREET ADDRESS CITY-ST-ZIP	C <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition David G. Moore 6 Hutton Centre Drive, Suite 400 Santa Ana, CA 92707	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V <input type="checkbox"/> Delete WILSON, BETH 6 HUTTON CENTRE DRIVE SUITE 400 SANTA ANA CA 92707		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V,D <input type="checkbox"/> Change <input type="checkbox"/> Addition Beth A. Wilson 6 Hutton Centre Drive, Suite 400 Santa Ana, CA 92707	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Delete DEVEREUX, DENNIS L 6 HUTTON CENTRE DRIVE SUITE 400 SANTA ANA CA 92707		TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO,D <input type="checkbox"/> Change <input type="checkbox"/> Addition Jack D. Massimino 6 Hutton Centre Drive, Suite 400 Santa Ana, CA 92707	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VCFO <input checked="" type="checkbox"/> Delete BEAL, DENNIS N 6 HUTTON CENTRE DRIVE SUITE 400 SANTA ANA CA 92707		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Change <input type="checkbox"/> Addition Robert C. Owen 6 Hutton Centre Drive, Suite 400 Santa Ana, CA 92707	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS <input type="checkbox"/> Delete MORTENSEN, STAN A 6 HUTTON CENTRE DRIVE SUITE 400 SANTA ANA CA 92707		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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1st MOORE CR2E034 (10/04)

4. FEI Number **83-0301912** ☐ Applied For
☐ Not Applicable

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

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:  **Stan A. Mortensen**

2/1/05 (714) 427-3000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #