

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002106

FILED  
Jan 30, 2008  
Secretary of State

Entity Name: SWINERTON MANAGEMENT & CONSULTING, INC.

## Current Principal Place of Business:

260 TOWNSEND STREET  
2ND FLOOR  
SAN FRANCISCO, CA 94107

## New Principal Place of Business:

## Current Mailing Address:

260 TOWNSEND STREET  
2ND FLOOR  
SAN FRANCISCO, CA 94107

## New Mailing Address:

FEI Number: 91-1810375      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BUSH, TERENCE  
Address: 260 TOWNSEND ST.  
City-St-Zip: SAN FRANCISCO, CA 94107

Title: VD ( ) Delete  
Name: MARKS, GORDON W  
Address: 260 TOWNSEND ST.  
City-St-Zip: SAN FRANCISCO, CA 94107

Title: VSD ( ) Delete  
Name: ARGILLA, LUKE P  
Address: 260 TOWNSEND ST.  
City-St-Zip: SAN FRANCISCO, CA 94107

Title: TD ( ) Delete  
Name: RE, MICHAEL  
Address: 260 TOWNSEND ST.  
City-St-Zip: SAN FRANCISCO, CA 94107

Title: CD ( ) Delete  
Name: HOOPES, JEFFREY C  
Address: 260 TOWNSEND ST.  
City-St-Zip: SAN FRANCISCO, CA 94107

Title: VD ( ) Delete  
Name: DAVIS, DONALD E  
Address: 865 S. FIGUEROA STREET, SUITE 3000  
City-St-Zip: LOS ANGELES, CA 90017

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LUKE P. ARGILLA

VSD

01/30/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date