

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003088

FILED
Jan 11, 2006
Secretary of State

Entity Name: ACACIA CAPITAL CORPORATION

Current Principal Place of Business:

101 SOUTH ELLSWORTH AVE
SAN MATEO, CA 94401

New Principal Place of Business:

101 SOUTH ELLSWORTH AVE, SUITE 300
SAN MATEO, CA 94401

Current Mailing Address:

400 EAST VAN BUREN, SUITE 650
PHOENIX, AZ 85004

New Mailing Address:

FEI Number: 94-3307073 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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: CLELLAND, F. WESLEY III
Address: 400 E. VAN BUREN, SUITE 650
City-St-Zip: PHOENIX, AZ 85004

Title: S () Delete
Name: LARSON, ROBERT E
Address: 101 SOUTH ELLSWORTH AVE STE 300
City-St-Zip: SAN MATEO, CA 94401

Title: COO () Delete
Name: LEUPOLD, ROBERT G
Address: 101 SOUTH ELLSWORTH AVE STE 300
City-St-Zip: SAN MATEO, CA 94401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: LARSON, ROBERT E
Address: 101 SOUTH ELLSWORTH AVE STE 300
City-St-Zip: SAN MATEO, CA 94401

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

I hereby certify that the information supplied with this filing does not qualify for the 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: F. WESLEY CLELLAND, III

PD

01/11/2006

Electronic Signature of Signing Officer or Director

Date