

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F04000005167

1. Entity Name
UHD CALIFORNIA INC.



Principal Place of Business

973 N COLORADO STREET
GILBERT, AZ 85233

Mailing Address

973 N COLORADO STREET
GILBERT, AZ 85233

FILED

06 MAY -3 AM 10:21

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



04132006 No Chg-P CR2E034 (11/05)

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4. FEI Number
41-2103182

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

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

**DO NOT WRITE
IN THIS SPACE**

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
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
LILLARD, LEONARD H
6825 E CHERRY DRIVE
PARADISE VALLEY, AZ 85253

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
BOOTH, BARRY C
1671 W HOUSTON AVENUE
GILBERT, AZ 85233

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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**DO NOT WRITE
IN THIS SPACE**

K. Eckel MAY 10 2006

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/06
Date

480.948-500
Daytime Phone #