

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90211 006 ***150.00

DOCUMENT # F93000000467

1. Corporation Name
MARSH LANDING DEVELOPMENT CORPORATION

Principal Place of Business
ATTN: STATE TAX DEPT
4 EMBARCADERO CENTER, SUITE 2200
SAN FRANCISCO CA 94111
US

Mailing Address
ATTN: STATE TAX DEPT
4 EMBARCADERO CENTER, SUITE 2200
SAN FRANCISCO CA 94111
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/01/1993

4. FEI Number

94-3174400

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE

NAME LANE, JOSEPH C.
STREET ADDRESS 7 WARFORD TERRACE
CITY-ST-ZIP ORINDA CA

1.1 TITLE JESSIE V. CRENS ☒ Change ☐ Addition

1.2 NAME PRESIDENT
1.3 STREET ADDRESS 15 ALICE PLACE
1.4 CITY-ST-ZIP ORINDA, CA. 94536

TITLE VP ☒ DELETE

NAME GROMAR, MICHAEL E.
STREET ADDRESS 4 EMBARCADERO CENTER #2200
CITY-ST-ZIP SAN FRANCISCO CA

2.1 TITLE VP ☒ Change ☐ Addition

2.2 NAME JOHN JENKINS-STARK
2.3 STREET ADDRESS 4 EMBARCADERO CENTER #2200
2.4 CITY-ST-ZIP SAN FRANCISCO, CA. 94111

TITLE VSD ☐ DELETE

NAME NORD, THOMAS C
STREET ADDRESS 5953 MANCHESTER DR.
CITY-ST-ZIP OAKLAND CA

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE V ☐ DELETE

NAME GLENN, CURT F
STREET ADDRESS 4 EMBARCADERO CENTER, SUITE 2200
CITY-ST-ZIP SAN FRANCISCO CA

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE T ☐ DELETE

NAME TINNON, RICHARD M.
STREET ADDRESS 4 EMBARCADERO CENTER STE 2200
CITY-ST-ZIP SAN FRANCISCO CA

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE V ☐ DELETE

NAME KANTER, GARY L
STREET ADDRESS 684 HAWTHORNE DRIVE
CITY-ST-ZIP TIBURON CA

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THOMAS C. NORD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/3/99
Date

(415) 955-3200
Daytime Phone #

CR2E034 (11/98)

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