

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra S. Matheson
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 9:55

DOCUMENT # **F94000002097 (3)**

1. Corporation Name:

INTERSECTION DEVELOPMENT CORPORATION

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**3000 E. LAS HERMANAS ST.
RANCHO DOMINGUEZ CA 90221**

Mailing Address

**3000 E. LAS HERMANAS ST.
RANCHO DOMINGUEZ CA 90221**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/21/1994

3a. Date of Last Report

04/21/94

4. FEI Number

95-4180041

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 has liability for intangible tax under S. 190, Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 1511 E. Orangethorpe

2a. Mailing Address

26 1511 E. Orangethorpe

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite A

27 Suite A

City & State

City & State

23 Fullerton

28 Fullerton, CA

Zip

Country

Zip

Country

24 92631

25 Orange

29 92631

30 Orange

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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 (5)(b) and 607 15(9), 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607 05(6), Florida Statutes.

SIGNATURE

(Signature of registered agent or person authorized to accept appointment)

(Signature of Registered Agent or person authorized to accept appointment)

(Date)

12. OFFICERS AND DIRECTORS

TITLE **DC**
NAME **MARKOWITZ, MAURY**
STREET ADDRESS **3000 E. LAS HERMANAS**
CITY, ST, ZIP **RANCHO DOMINGUEZ CA 90221**

TITLE **PD**
NAME **ANDERSON, BRIAN P**
STREET ADDRESS **3000 E. LAS HERMANAS**
CITY, ST, ZIP **RANCHO DOMINGUEZ CA 90221**

TITLE **SCFO**
NAME **WESCOAT, KYLE**
STREET ADDRESS **3000 E. LAS HERMANAS**
CITY, ST, ZIP **RANCHO DOMINGUEZ CA 90221**

TITLE **COO**
NAME **MASON, GREG**
STREET ADDRESS **3000 E. LAS HERMANAS**
CITY, ST, ZIP **RANCHO DOMINGUEZ CA 90221**

TITLE **V**
NAME **MAGERKURTH, JIM**
STREET ADDRESS **3000 E. LAS HERMANAS**
CITY, ST, ZIP **RANCHO DOMINGUEZ CA 90221**

TITLE **V**
NAME **SCHMIDT, JAMES**
STREET ADDRESS **3000 E. LAS HERMANAS**
CITY, ST, ZIP **RANCHO DOMINGUEZ CA 90221**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS **1511 E. Orangethorpe Ave, Suite A**
1.4 CITY, ST, ZIP **Fullerton, CA 92631**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME **Brian P. Anderson**
2.3 STREET ADDRESS **1511 E. Orangethorpe Ave, Suite A**
2.4 CITY, ST, ZIP **Fullerton, CA 92631**

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME **SCFO**
3.3 STREET ADDRESS **Pill, Edward J.**
3.4 CITY, ST, ZIP **1511 E. Orangethorpe Ave, Suite A**
Fullerton, CA 92631

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME **Coo**
4.3 STREET ADDRESS **Mason, Greg**
4.4 CITY, ST, ZIP **1511 E. Orangethorpe Ave, Suite A**
Fullerton, CA 92631

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME **V**
5.3 STREET ADDRESS **Magerkurth, Jim**
5.4 CITY, ST, ZIP **1511 E. Orangethorpe Ave, Suite A**
Fullerton, CA 92631

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 110 (2)(3)(b), Florida Statutes. I further certify that the information indicated on the 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 person 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.

SIGNATURE:

Edward J. Pill

(714) 447-0355