

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F94000004329 (8)**

1. Corporation Name

**SECURITY PACIFIC EXECUTIVE/PROFESSIONAL SERVICES
, INC.**



Principal Place of Business

14707 E. 2ND AVE., #100
AURORA CO 80011

Mailing Address

10089 WILLOW CREEK ROAD
ATTN: TAX DEPT., #24400
SAN DIEGO CA 92131
US

3. Date Incorporated or Qualified

08/22/1994

3a. Date of Last Report

04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

42-1089505

Applied For

Not Applicable

22. Suite, Apt. #, etc.

Suite, Apt. #, etc.

23. City & State

27. City & State

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24. Zip Country

29. Zip Country

8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 PDC ☐ DELETE
NAME WILSON, M F
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY - ST - ZIP SAN DIEGO CA 92131

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE D ☐ DELETE
NAME GUNN, GERALD M
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY - ST - ZIP SAN DIEGO CA 92131

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE D ☐ DELETE
NAME JONES, JAMES G
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY - ST - ZIP SAN DIEGO CA 92131

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE D ☒ DELETE
NAME PETERSON, THOMAS E
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY - ST - ZIP SAN DIEGO CA 92131

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE DVT ☐ DELETE
NAME WILLIAMS, CAMERON E
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY - ST - ZIP SAN DIEGO CA

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE V ☐ DELETE
NAME AUSTIN, NORMAN S
STREET ADDRESS 10089 WILLOW CREEK RD.
CITY - ST - ZIP SAN DIEGO CA 92131

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Claudia Chan-Shaffer* Claudia Chan-Shaffer, Senior Vice President 2/7/96 (619) 530-9539

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (12/95)