

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

**FILED**  
**Mar 09, 1999 8:00 am**  
**Secretary of State**

03-09-1999 90062 030 \*\*\*158.75

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**DOCUMENT # F94000005932**

1. Corporation Name  
**PACIFIC 17, INC.**

Principal Place of Business  
**4740 MURPHY CANYON RD.  
SUITE 200  
SAN DIEGO CA 92123**

Mailing Address  
**4740 MURPHY CANYON RD.  
SUITE 200  
SAN DIEGO CA 92123**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**11/16/1994**

4. FEI Number

**95-3504341**

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

**21 1455 Frazee Road, Suite 805**

2a. Mailing Address

**26 1455 Frazee Road**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**23 San Diego, CA**

City & State

**28 San Diego, CA**

Zip Country

**24 92108 25 USA**

Zip Country

**29 92108 30 USA**

9. Name and Address of Current Registered Agent

**FEIN, GERRY E C.P.A.  
1713 WHITEHALL DRIVE, #305  
FT. LAUDERDALE 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 607.0502 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

TITLE **PD** ☐ DELETE

NAME **MORGAN, DENIS H**  
STREET ADDRESS **4740 MURPHY CANYON RD., SUITE 200**  
CITY-ST-ZIP **SAN DIEGO CA 92123**

TITLE **VPD** ☐ DELETE

NAME **COLEMAN, HAROLD**  
STREET ADDRESS **4740 MURPHY CANYON RD., SUITE 200**  
CITY-ST-ZIP **SAN DIEGO CA 92123**

TITLE **VPD** ☐ DELETE

NAME **YHAP, BENJAMIN**  
STREET ADDRESS **4740 MURPHY CANYON RD., SUITE 200**  
CITY-ST-ZIP **SAN DIEGO CA 92123**

TITLE **VPD** ☐ DELETE

NAME **FORREST, ROBERT C. I**  
STREET ADDRESS **4740 MURPHY CANYON RD., SUITE 200**  
CITY-ST-ZIP **SAN DIEGO CA 92123**

TITLE **VPD** ☐ DELETE

NAME **HAYTER, KEITH W.**  
STREET ADDRESS **4740 MURPHY CANYON RD., SUITE 200**  
CITY-ST-ZIP **SAN DIEGO CA 92123**

TITLE **VPD** ☐ DELETE

NAME **KING, FRITZ W.**  
STREET ADDRESS **4740 MURPHY CANYON RD., SUITE 200**  
CITY-ST-ZIP **SAN DIEGO CA 92123**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **Vice President** ☐ Change ☒ Addition

1.2 NAME **Zimmer, Kirk R.**  
1.3 STREET ADDRESS **1455 Frazee Road, Suite 805**  
1.4 CITY-ST-ZIP **San Diego, CA 92108**

2.1 TITLE **PD** ☒ Change ☐ Addition

2.2 NAME **Morgan, Denis H.**  
2.3 STREET ADDRESS **1455 Frazee Road, Suite 805**  
2.4 CITY-ST-ZIP **San Diego, CA 92108**

3.1 TITLE **VPD** ☒ Change ☐ Addition

3.2 NAME **Coleman, Harold**  
3.3 STREET ADDRESS **1455 Frazee Road, Suite 805**  
3.4 CITY-ST-ZIP **San Diego, CA 92108**

4.1 TITLE **VPD** ☒ Change ☐ Addition

4.2 NAME **Yhap. Benjamin**  
4.3 STREET ADDRESS **1455 Frazee Road, Suite 805**  
4.4 CITY-ST-ZIP **San Diego, CA 92108**

5.1 TITLE **VPD** ☒ Change ☐ Addition

5.2 NAME **Forrest, Robert C.I.**  
5.3 STREET ADDRESS **1455 Frazee Road, Suite 805**  
5.4 CITY-ST-ZIP **San Diego, CA 92108**

6.1 TITLE **VPD** ☒ Change ☐ Addition

6.2 NAME **Hayter, Keith W.**  
6.3 STREET ADDRESS **1455 Frazee Road, Suite 805**  
6.4 CITY-ST-ZIP **San Diego, CA 92108**

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:

*Gerry E. Fein*

Gerry E. Fein, Director of Finance

02/23/99 (619) 542-

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1717

CR2E034 (1/98)