

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000006612

1. Entity Name

O'BRIEN-KREITZBERG INC.

DEPARTMENT OF STATE

FILED
Aug 21, 2000 8:00 am
Secretary of State

08-21-2000 90212 036 ***550.00

Principal Place of Business

50 FREMONT ST 24TH FLR
SAN FRANCISCO CA 94105-2236
US

Mailing Address

50 FREMONT ST 24TH FLR
SAN FRANCISCO CA 94105-2236
US

2. Principal Place of Business

3. Mailing Address

100 CALIFORNIA STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

SUITE 500

City & State

City & State

SAN FRANCISCO CA

4. FEI Number

94-3213883

Applied For

Not Applicable

Zip

Country

Zip

94111

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

Name

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

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

☒

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DARROW, ARTHUR C 911 WILSHIRE BLVD., SUITE 700 LOS ANGELES CA	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KREITZBERG, FRED C. 50 FREMONT STREET, #24TH FLOOR SAN FRANCISCO CA	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PUGET, LESLIE 911 WILSHIRE BLVD, STE 700 LOS ANGELES CA 90017	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D KRUSI, ALAN 50 FREMONT ST, #24TH FLOOR SAN FRANCISCO CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C JONES, DAVID 50 FREMONT ST 24TH FLR SAN FRANCISCO CA 94105-2236	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carol Brummerstedt
Assistant Secretary

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

0008000

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

FILED

Attachment
F94 006006612
DU80069

O'BRIEN-KREITZBERG, INC./ DOCUMENT NUMBER F94000006612

11. OFFICERS & DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS & DIRECTORS IN 11	
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	1.1 Title 1.2 Name 1.3 Street Address 1.4 City-State-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Baldwin, Clay 50 Fremont Street, 24 th floor San Francisco, CA 94105
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	2.1 Title 2.2 Name 2.3 Street Address 2.4 City-State-ZIP	S <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Ainsworth, Kent A. 100 California Street, Suite 500 San Francisco, CA 94111
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	3.1 Title 3.2 Name 3.3 Street Address 3.4 City-State-ZIP	D/P <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Krusi, Alan 50 Fremont Street, 24 th floor San Francisco, CA 94105
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	4.1 Title 4.2 Name 4.3 Street Address 4.4 City-State-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Hobbs, Ruth 50 Fremont Street, 24 th floor San Francisco, CA 94105
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	5.1 Title 5.2 Name 5.3 Street Address 5.4 City-State-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Bishop, Thomas 50 Fremont Street, 24 th floor San Francisco, CA 94105
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	6.1 Title 6.2 Name 6.3 Street Address 6.4 City-State-ZIP	CFO <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Holmgren, Jon 50 Fremont Street, 24 th floor San Francisco, CA 94105
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	7.1 Title 7.2 Name 7.3 Street Address 7.4 City-State-ZIP	AS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Brummerstedt, Carol 100 California Street, Suite 500 San Francisco, CA 94111
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	8.1 Title 8.2 Name 8.3 Street Address 8.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	9.1 Title 9.2 Name 9.3 Street Address 9.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	10.1 Title 10.2 Name 10.3 Street Address 10.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	11.1 Title 11.2 Name 11.3 Street Address 11.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
Title Name Street Address City-State-ZIP	<input type="checkbox"/> Delete	12.1 Title 12.2 Name 12.3 Street Address 12.4 City-State-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

URS

Attachment
F94000006612
DW 80069

August 16, 2000

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

Re: O'BRIEN-KREITZBERG, INC.
California Domestic
Document Number F94000006612

TO WHOM IT MAY CONCERN:

Enclosed please find the 2000 Uniform Business Report prepared for the referenced corporation, along with a check in payment of the fee.

Please acknowledge your receipt of this filing by date-stamping the enclosed copy of this letter and returning it to me in the attached prepaid envelope.

If, for any reason, the filing cannot be effected promptly, then please contact me at the address below or by telephone at 415/774-2738.

Thank you!

Very truly yours,


Kristin Jones