

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

APPROVED
7/18/96

95 MAY -1 PM 3:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # **F95000001401 (7)**

1. Corporation Name
15-PLUS HOLDING COMPANY

Principal Place of Business: **865 S. FIGUEROA ST., #3500 LOS ANGELES CA 90017**
Mailing Address: **865 S. FIGUEROA ST., #3500 LOS ANGELES CA 90017**

2. Principal Place of Business **c/o**
21 **Westmark Realty Advisors**
22 Suite Apt. #, etc.
23 City & State
24 Zip Country
25 Country
26 **L.L.C.**
27 Suite, Apt. #, etc.
28 City & State
29 Zip Country
30

3. Date Incorporated or Qualified **03/23/1995**
3a. Date of Last Report
4. FEI Number **95-4521803**
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. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 **100001014751
-05/09/96--D1059--002**
84 City *****208.75 FL ***208.75**

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 _____ DATE _____

12. OFFICERS AND DIRECTORS	
TITLE: PD	<input checked="" type="checkbox"/> DELETE
NAME: MARTIN, VINCENT F JR	
STREET ADDRESS: 865 S. FIGUEROA ST., 3500	
CITY-STATE-ZIP: LOS ANGELES CA 90017	
TITLE: VD	<input type="checkbox"/> DELETE
NAME: ZARROW, STANTON H	
STREET ADDRESS: 865 S. FIGUEROA ST., #3500	
CITY-STATE-ZIP: LOS ANGELES CA 90017	
TITLE: TD	<input checked="" type="checkbox"/> DELETE
NAME: GRANTHAM, RICHARD R	
STREET ADDRESS: 865 S. FIGUEROA ST., #3500	
CITY-STATE-ZIP: LOS ANGELES CA 90017	
TITLE: V	<input checked="" type="checkbox"/> DELETE
NAME: GRAY, MICHAEL J	
STREET ADDRESS: 865 S. FIGUEROA ST., #3500	
CITY-STATE-ZIP: LOS ANGELES CA 90017	
TITLE: V	<input type="checkbox"/> DELETE
NAME: KRAUCH, WILLIAM K	
STREET ADDRESS: 865 S. FIGUEROA ST., #3500	
CITY-STATE-ZIP: LOS ANGELES CA 90017	
TITLE: V	<input checked="" type="checkbox"/> DELETE
NAME: LUDWIG, BRUCE L	
STREET ADDRESS: 865 S. FIGUEROA ST., #3500	
CITY-STATE-ZIP: LOS ANGELES CA 90017	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE: D/P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12 NAME: Clotfelter, Richard C.	
13 STREET ADDRESS: 865 S. Figueroa St., Ste. 3500	
14 CITY-STATE-ZIP: Los Angeles, CA 90017-2543	
21 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME:	
23 STREET ADDRESS:	
24 CITY-STATE-ZIP:	
31 TITLE: S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
32 NAME: Todd Evan Stark, Esq.	
33 STREET ADDRESS: 865 S. Figueroa St., Ste. 3500	
34 CITY-STATE-ZIP: Los Angeles, CA 90017-2543	
41 TITLE: D/SR. VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME: Scott E. Tracy	
43 STREET ADDRESS: 865 S. Figueroa St., Suite 3500	
44 CITY-STATE-ZIP: Los Angeles, CA 90017	
51 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME:	
53 STREET ADDRESS:	
54 CITY-STATE-ZIP:	
61 TITLE: T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
62 NAME: Laurie E. Romanak	
63 STREET ADDRESS: 865 S. Figueroa Street, Suite 3500	
64 CITY-STATE-ZIP: Los Angeles, CA 90017	

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: *Todd Evan Stark*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Todd Evan Stark, Secretary

4/30/96 (213) 683-4200

CR2E034 (12/95)