

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

**FILED**  
**May 06 1997 8:00am**  
**Secretary of State**

**PROFIT CORPORATION ANNUAL REPORT 1997**



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

**DOCUMENT # F95000001401 (7)**

1. Corporation Name  
**15-PLUS HOLDING COMPANY**



Principal Place of Business Mailing Address  
**865 S. FIGUEROA ST., #3500** **865 S. FIGUEROA ST., #3500**  
**LOS ANGELES CA 90017** **LOS ANGELES CA 90017-5472**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		03/23/1995	05/01/1996
22 City & State		27 City & State		4. FEI Number	Applied For
23 Zip		28 Zip		95-4521803	Not Applicable
24 Country		30 Country		5. Certificate of Status Desired	\$8.75 Additional Fee Required
				<input checked="" type="checkbox"/> Yes	
				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	
				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
<b>THE PRENTICE-HALL CORPORATION SYSTEM, INC.</b> <b>1201 HAYS STREET</b> <b>SUITE 105</b> <b>TALLAHASSEE FL 32301</b>				B1	Name		
				B2	Street Address (P.O. Box Number is Not Acceptable)		
				B3			
				B4	City	FL	B5

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CLOTFELTER, RICHARD C	1.2 NAME	
STREET ADDRESS	865 S. FIGUEROA STREET, SUITE 3500	1.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90017-2543	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZARROW, STANTON H	2.2 NAME	
STREET ADDRESS	865 S. FIGUEROA ST., #3500	2.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90017	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STARK, TODD E	3.2 NAME	
STREET ADDRESS	865 S. FIGUEROA STREET, SUITE 3500	3.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90017-2543	3.4 CITY-ST-ZIP	
TITLE	DVP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRACY, SCOTT E	4.2 NAME	
STREET ADDRESS	865 FIGUEROA STREET, SUITE 3500	4.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90017	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRAUCH, WILLIAM K	5.2 NAME	
STREET ADDRESS	865 S. FIGUEROA ST., #3500	5.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90017	5.4 CITY-ST-ZIP	
TITLE	T	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROMANAK, LAURIE	6.2 NAME	
STREET ADDRESS	865 FIGUEROA STREET, SUITE 3500	6.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90017	6.4 CITY-ST-ZIP	

14. I do 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, changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_

CR2E034 (9/96)