

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000000797

FILED
Apr 28, 2004
Secretary of State

Entity Name: DEL NORTE, INC.

Current Principal Place of Business:

323 FIFTH ST
EUREKA, CA 95501

New Principal Place of Business:

Current Mailing Address:

323 FIFTH ST
EUREKA, CA 95501 US

New Mailing Address:

FEI Number: 72-1315872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: GRUSHKIN, ALLAN
Address: 323 FIFTH ST
City-St-Zip: EUREKA, CA 95501

Title: DC () Delete
Name: ARKLEY, ROBIN P II
Address: 323 FIFTH ST
City-St-Zip: EUREKA, CA 95501

Title: EVP () Delete
Name: MENDHEIM, JACK
Address: 3050 WESTFORK DR
City-St-Zip: BATON ROUGE, LA 70816

Title: P () Delete
Name: ARKLEY, II R
Address: 323 FIFTH ST
City-St-Zip: EUREKA, CA 95501

Title: VP () Delete
Name: AUSTIN, SANDRA
Address: 323 FIFTH ST
City-St-Zip: EUREKA, CA 95501

Title: CFO (X) Delete
Name: ARKLEY, ROBIN P II
Address: 323 FIFTH ST
City-St-Zip: EUREKA, CA 95501

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SVP (X) Change () Addition
Name: GRUSHKIN, ALLAN
Address: 323 FIFTH ST
City-St-Zip: EUREKA, CA 95501

Title: P/D (X) Change () Addition
Name: ARKLEY, ROBIN P II
Address: 323 FIFTH ST
City-St-Zip: EUREKA, CA 95501

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: CVP (X) Change () Addition
Name: DUNN, G. M
Address: 3050 WESTFORK DRIVE
City-St-Zip: BATON ROUGE, LA 70816

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALLAN GRUSHKIN

SVP

04/28/2004

Electronic Signature of Signing Officer or Director

Date