

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90142 010 ***150.00

DOCUMENT # F96000000797

1. Entity Name
DEL NORTE, INC.



Principal Place of Business
**323 FIFTH ST
EUREKA CA 95501**

Mailing Address
**323 Fifth Street
P.O. BOX 35
EUREKA, CA 95501
US**



2. Principal Place of Business

3. Mailing Address

323 Fifth Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Eureka, CA

Zip

Country

Zip

Country

95501

USA

4. FEI Number **72-1315872**

Applied For

Not Applicable

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

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **SVP** ☐ Delete
NAME **GRUSHKIN, ALLAN**
STREET ADDRESS **323 FIFTH ST**
CITY-ST-ZIP **EUREKA CA 95501**

TITLE **Secretary** ☐ Change ☒ Addition
NAME **Allan Grushkin**
STREET ADDRESS **323 Fifth Street**
CITY-ST-ZIP **Eureka, CA 95501**

TITLE **DC** ☐ Delete
NAME **ARKLEY, ROBIN P II**
STREET ADDRESS **323 FIFTH ST**
CITY-ST-ZIP **EUREKA CA 95501**

TITLE **CFO** ☐ Change ☒ Addition
NAME **Robin P. Arkley II**
STREET ADDRESS **323 Fifth Street**
CITY-ST-ZIP **Eureka, CA 95501**

TITLE **V** ☐ Delete
NAME **MENDHEIM, JACK**
STREET ADDRESS **11911 JUSTICE AVE.**
CITY-ST-ZIP **BATON ROUGE LA 70816**

TITLE **Executive Vice President** ☒ Change ☐ Addition
NAME **Jack Mendheim**
STREET ADDRESS **3050 Westfork Drive**
CITY-ST-ZIP **Baton Rouge, LA 70816**

TITLE **P** ☐ Delete
NAME **ARKLEY, II R**
STREET ADDRESS **323 FIFTH ST**
CITY-ST-ZIP **EUREKA CA 95501**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **AUSTIN, SANDRA**
STREET ADDRESS **323 FIFTH ST**
CITY-ST-ZIP **EUREKA CA 95501**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Allan Grushkin, Senior Vice President

January 7, 2003 707-442-2818

Date

Daytime Phone #

CR2E034 (10/02)