


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**May 02, 2006 08:00 AM  
Secretary of State**

<b>DOCUMENT # F96000004531</b> 1. Entity Name ATKINSON-BAKER, INC.	
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Principal Place of Business 500 N. BRAND BLVD., 3RD FLOOR GLENDALE, CA 91203	Mailing Address 500 N. BRAND BLVD., 3RD FLOOR SUITE 250 GLENDALE, CA 91203
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<b>DO NOT WRITE IN THIS SPACE</b>
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04172006 No Chg-P CR2E034 (11/05)

4. FEI Number 95-4189037	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525
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<b>DO NOT WRITE IN THIS SPACE</b>
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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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS ATKINSON-BAKER, SHEILA 500 N BRAND BLVD 3RD FL GLENDALE, CA 91203
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT ATKINSON-BAKER, ALAN 500 N BRAND BLVD 3RD FL GLENDALE, CA 91203
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<p>000000558503 05/17/06-80095-017 158.75</p> <p><b>DO NOT WRITE IN THIS SPACE</b></p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:** Alan Atkinson Baker **ALAN ATKINSON-BAKER** 4/18/2006 (818) 551-7300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #