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Feb 20, 1999 8:00 am
Secretary of State

02-20-1999 90008 010 ****61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F96000006700

1. Corporation Name
FOUNDATION FOR SOCIAL RESOURCES, INC.

* 8 80836 - 90008 3 - 10 *

Principal Place of Business 130 MCCORMICK AVE STE 104 COSTA MESA CA 92626 US	Mailing Address 130 MCCORMICK AVE STE 104 COSTA MESA CA 92626 US
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 12/20/1996
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 95-4202639
City & State 23	City & State 28	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
Zip 24	Country 25	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HIRSCH, WILLIAM W	1.2 NAME	
STREET ADDRESS	22321 WALLINGFORD LN	1.3 STREET ADDRESS	
CITY-ST-ZIP	HUNTINGTON BCH CA 92646	1.4 CITY-ST-ZIP	
TITLE	DT <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	EVANS, KIRK S	2.2 NAME	
STREET ADDRESS	9281 SHADWELL DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	HUNTINGTON BCH CA 92646	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUTCHINSON, CHARLES S	3.2 NAME	
STREET ADDRESS	10428 RIVERWOOD WAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	RANCHO CORDOVA CA 95870	3.4 CITY-ST-ZIP	
TITLE	DS <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEBB, JONATHAN B	4.2 NAME	
STREET ADDRESS	896 S OAKWOOD ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORANGE CA 92869	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JESSIE, RON	5.2 NAME	
STREET ADDRESS	202 17TH ST #B	5.3 STREET ADDRESS	
CITY-ST-ZIP	HUNTINGTON BCH CA 92648	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William W. Hirsch **REMOVED W-Hirsch** 2-2-1999 714-668-1528
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)