

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000001021

1. Entity Name

TRS MANAGEMENT RESOURCES, INC.

FILED
Feb 26, 2000 8:00 am
Secretary of State

02-26-2000 90018 028 ***150.00

Principal Place of Business

Mailing Address

3353 MICHELSON DR
SUITE 551-M
IRVINE CA 92698
US

3353 MICHELSON DR
SUITE 551-M
IRVINE CA 92612-0650
US

2. Principal Place of Business

ONE ENTERPRISE DR.

3. Mailing Address

ONE ENTERPRISE DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

F2B

F2B

City & State

City & State

ALISO VIEJO CA

ALISO VIEJO CA

Zip

Zip

92656

Country

US

Country

US

92656-2606

4. FEI Number

33-0735576

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

NRAI SERVICES INC
526 E PARK AVENUE
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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. WHEELER, N S 300 PARK BOULEVARD, STE 105 ITASCA IL	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FISHER, L N 3353 MICHELSON DRIVE IRVINE CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT MORROW, T H 3353 MICHELSON DRIVE IRVINE CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STEIN, J C 100 FLUOR DANIEL DRIVE GREENVILLE SC	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GRUBBS, W. J. ONE ENTERPRISE DR. ALISO VIEJO CA 92656	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ONE ENTERPRISE DR. ALISO VIEJO CA 92656	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ONE ENTERPRISE DR. ALISO VIEJO CA 92656	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ONE ENTERPRISE DR. ALISO VIEJO CA 92656	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HAKK, R. F ONE ENTERPRISE DR. ALISO VIEJO CA 92656	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO ROACH, L. T. ONE ENTERPRISE DR. ALISO VIEJO CA 92656	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

T.H. Morrow

T.H. MORROW, ASST. TREASURER

2/15/2000

(949) 349-4031

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)