

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000001883

1. Entity Name

BAY AREA PIGGYBACK, INC.

**FILED**  
**Jan 21, 2000 8:00 am**  
**Secretary of State**

01-21-2000 90063 025 \*\*\*150.00

Principal Place of Business

560 LENNON LN  
WALNUT CREEK CA 94598

Mailing Address

560 LENNON LN  
WALNUT CREEK CA 94598-2415

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-2286648

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

LOTERO, RUSHTON G  
6885 NW 25TH ST BAY #5  
MIAMI FL 33122

7. Name and Address of New Registered Agent

Name

Lotero-Rushton, Gloria

Street Address (P.O. Box Number is Not Acceptable)

8125 NW 53rd St #118

City

Miami

FL

Zip Code  
33166

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

TITLE VP  
NAME FRANCIS, GERALD A  
STREET ADDRESS 1690 SARGENT RD  
CITY-ST-ZIP CONCORD CA 94518 ☐ Delete

TITLE VP  
NAME MERRITT, ELEANOR  
STREET ADDRESS 23585 W 207TH ST  
CITY-ST-ZIP SPRING HILL KS 66083 ☐ Delete

TITLE DST  
NAME FRANCIS, MYRNA J  
STREET ADDRESS 1670 SARGENT RD  
CITY-ST-ZIP CONCORD CA 94518 ☐ Delete

TITLE P  
NAME FRANCIS, GEORGE W  
STREET ADDRESS 1261 BERMUDA CT  
CITY-ST-ZIP CONCORD CA 94518 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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

*George W. Francis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/05/00

Date

925-932-1313

Daytime Phone #

CR2E034 (9/99)