

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750)

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Sep 16, 1999 8:00 am
Secretary of State

09-16-1999 90013 008 ***550.00

DOCUMENT # **F97000004446**

1. Corporation Name

**FOUNDATION INTEGRATED RISK MANAGEMENT SOLUTIONS,
INCORPORATED**

Principal Place of Business

**390 NORTH WIGET LANE
WALNUT CREEK CA 94598-2406**

Mailing Address

**11171 SUN CENTER DRIVE
C/O LEGAL DEPARTMENT
RANCHO CORDOVA CA 95670**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/22/1997

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

25 USA

2a. Mailing Address

26 3400 Data Drive, 3E

27 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

31 USA

4. FEI Number

68-0165539

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes the current year
Intangible Personal Property. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CT CORPORATIVO SYSTEM
1200 SO PINE ISLAND RD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **CEO** ☐ DELETE

NAME **COSTA, MAURICE A**
STREET ADDRESS **11171 SUN CENTER DRIVE**
CITY-ST-ZIP **RANCHO CORDOVA CA 95670**

TITLE **CD** ☒ DELETE

NAME **COSTA, MAURICE A**
STREET ADDRESS **11171 SUN CENTER DRIVE**
CITY-ST-ZIP **RANCHO CORDOVA CA 95670**

TITLE **D** ☒ DELETE

NAME **GELLERT, JAY M**
STREET ADDRESS **21600 OXNARD ST STE 1700**
CITY-ST-ZIP **WOODLAND HILLS CA 91367**

TITLE **IPD** ☐ DELETE

NAME **WHITE, ROBERT P**
STREET ADDRESS **11171 SUN CENTER DRIVE**
CITY-ST-ZIP **RANCHO CORDOVA CA 95670**

TITLE **VFT** ☐ DELETE

NAME **SMITH, STEPHEN C**
STREET ADDRESS **390 NORTH WIGET LANE**
CITY-ST-ZIP **WALNUT CREEK CA 94598**

TITLE **S** ☒ DELETE

NAME **NIENOW, TRECIA M**
STREET ADDRESS **11171 SUN CENTER DRIVE**
CITY-ST-ZIP **RANCHO CORDOVA CA 95670**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **CEO/C/D** ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS **3400 Data Drive, 3E**
1.4 CITY-ST-ZIP

2.1 TITLE **D** ☐ Change ☒ Addition

2.2 NAME **Ronald E. Seibel**
2.3 STREET ADDRESS **153 Technology Drive**
2.4 CITY-ST-ZIP **Irvine, CA 92618**

3.1 TITLE **D** ☐ Change ☒ Addition

3.2 NAME **Gregory L. Johnson**
3.3 STREET ADDRESS **3400 Data Drive, 3E**
3.4 CITY-ST-ZIP **Rancho Cordova, CA 95670**

4.1 TITLE **P/D** ☒ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS **3400 Data Drive, 3E**
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE **S** ☐ Change ☒ Addition

6.2 NAME **B. Curtis Westen, Jr.**
6.3 STREET ADDRESS **21650 Oxnard Street**
6.4 CITY-ST-ZIP **Woodland Hills, CA 91367**

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

Robert P. White, President

SIGNATURE:

Robert P. White

9/10/99

(916) 631-6114