4.5

2000 UNIFORM BUSINESS REPORT (UBR)

							FILED				
DOCUMENT # F9700.0005281 1. Entity Name							00 JUN 23 AHII: I	0			
FAIRMARK DEVELOPMENT, INC. (FF DEVELOPMENT, I							SECRETARY OF STAT	FE. IDA			
Principal Pla	ce of Busin	ess	Mailing Address								
5510 MOREHOUSE DRIVE, SUITE 200 SAN DIEGO CA 92121											
2. Principal Place of Business			3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				DO NOT WRITE IN TH	IIS SPA	DE		_
City & State			City & State				El Number -0772308		$\overline{}$	pplied For ot Applicabl	e
Zip			Zip	Co	untry	5 . C	5. Certificate of Status Desired \$8.75 Additional Fee Required				
	6. Name	and Address of Current R	legistered Agent			7. Na	ame and Address of New Register	ed Age	<u>nt</u>		4
					Name						
CORPAMERICA, INC.					Street Addre	ess (P.O. Box Number is Not Acceptable)					1
_ +		DREWS AVENUE					•			_	٦
SUITE 21	16			 				-, T	Zip Cod	de	┨
FT. LAUDERDALE, FL 33316								<u>'L</u>	p		
8. The above	named en	tity submits this statement	for the purpose of changir	ng its reg	istered office or	r register	red agent, or both, in the State of Flo	rida.			
SIGNATURE											
JOIGNATORE		yped or printed name of registe	red agent and title if applicab	le.	(NOTE: Registere	d Agent si	ignature required when reinstating)	DATE			
		· · · · ·			· · · · · · · · · · · · · · · · · · ·		1				4
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW! After MAY 1, 200 Make Check Payable						00	10. Election Campaign Financing Trust Fund Contribution.			O May Be to Fees	
11. OFFICERS AND DIRECTORS							I TIONS/CHANGES TO OFFICERS A	ND DID	CTOR	C IN 44	4
TITLE	PD	OFFICERS AND DI	Delete	12. TITLE		ADDII	IONS/CHANGES TO OFFICERS A		Change	Addition	18
NAME - HASHIOKA, CHRISTOPH					I			ш	O'REINGO	, 100,00] {
STREET ADDRESS		STE 200	ET ADDRESS						1		
CITY - ST - ZIP		IEGO, CA 92121		CITY	- ST - ZIP					_] į
TITLE ,	V		Delete	TITLE			·		Change	Addition	า[
NAME		, GLENN D.		NAMI	I						
STREET ADDRESS CITY - ST - ZIP	1 JOIO HORBHOUSE DK. SIL 200				ET ADDRESS - ST - ZIP		30000033	12	85	3	· <u> </u>
TITLE	SAN D	IEGO <u>. CA 92121</u>	Delete	TITLE		-	-07/05/0		1052	}000	
NAME		R, JAMES A.		NAME			****158	. / 	***	*158.7	Έ
STREET ADDRESS		MOREHOUSE DR.	STE 200	STRE	ET ADDRESS						1
CITY - ST - ZIP		IEGO, CA 92121		CITY	- ST - ZIP			•			╛
TITLE	D		Delete	TITLE	I				Change	Addition	1
NAME STREET ADDRESS		R, JAMES L.	OMD 000	NAME	ET ADDRESS						}
CITY - ST - ZIP		MOREHOUSE DR. IEGO, CA 92121	STE 200		- ST - ZIP		•				
TITLE	I SAN D	IEGO, CA 92121	Delete	TITLE	——————		<u>, , , , , , , , , , , , , , , , , , , </u>	П	Change	Addition	7
NAME				NAM	I				-		
STREET ADDRESS					ET ADDRESS						1
CITY - ST - ZIP				_	- ST - ZIP				<u> </u>		4
TITLE			Delete	TITLE				لــا	Change	Addition	۱'
NAME STREET ADDRESS	i			NAMI STRE	ET ADDRESS						1
CITY - ST - ZIP			•		- ST - ZIP		4	TS			
	ertify that the	e information supplied with	this filing does not qualify			d in Sect	tion 119.07(3)(i), Florida Statutes. I f	N 947	ertify th	at the	1
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 of an attachment with an address, with all other like empowered.											
SIGNATURE: CHRISTOPHER E. HASHIOKA 6/ /00 (858) 457-2123 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #											



FF DEVELOPMENT, INC.

Telephone (858) 457-2123

Facsimile (858) 457-3982

June 21, 2000

Uniform Business Report **Division of Corporations** P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Fairmark Development, Inc. 2000 Uniform Business Report

Dear Sir or Madam:

Enclosed please find the 2000 Uniform Business Report for Fairmark Development, Inc. along with a payment of \$158.75. We respectfully request that the late filing penalty be waived because we had not received the pre-printed report before the filing deadline nor had we received a pre-printed form after requesting one be sent to us. Accordingly, we apologize for not filing on your pre-printed form, however, we desired to comply with your filing requirements as soon as possible. If you have any questions, please feel free to call me at (619) 404-8165.

Sincerely,

Richard Swanson Tax Manager