2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F9700006402

1. Entity Name

UPPER CREEK INVESTORS, INC.

5377

FOUR EMBARCADERO CENTER. SUITE 2200 SAN FRANCISCO CA 94111

Principal Place of Business

Mailing Address

FOUR EMBARCADERO CENTER. SUITE 2200 SAN FRANCISCO CA 94111-5998 FILED Mar 04, 2000 8:00 am Secretary of State

03-04-2000 90051 032 ***150.00

						18111 18813 88131 88317 J	18(1) 66 (1) 88 (1)	r ann alan sa)(2 8 14 81 2 86)
2. Principal Place of Business 3. Mailing Address									
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc. City & State			DO NOT WRITE IN THIS SPACE				
				4. F	44-3288411				oplied For ot Applicable
Zip	Country	Zip	Country	5 . C	Certificate of S	Status Desired		8.75 Add	ditional
	6. Name and Address of Current F	tegistered Agent		7. N	ame and Ad	dress of New Re			
	0. (10.10 41.10 10.	<u></u>	Name						
1201	Prentice-Hall Corporation S Hays Street Ahassee FL 32301	Street Addre	Street Address (P.O. Box Number is Not Acceptable)						
		City	City FL Zip Code						
8. The above	named entity submits this statement for	the purpose of changing its	registered office or reg	istered age	ent, or both, is	n the State of Flor	id a .		
SIGNATURE .									
ordin in orde .	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOT	E: Registered Agent signature re	quired when rei	nstating)		DATE		
Tax filing r	oration is eligible to satisfy its Intangible equirement and efects to do so. ia on back)	!!! FEE IS \$150.00 000 Fee will be \$550. ble to Department of			on Campaign Fina Fund Contribution			0 May Be d to Fees	
11.	OFFICERS AND D	DIRECTORS	12.	ADI	DITIONS/CH	ANGES TO OFFI	CERS AND	DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CREWS, JESSYÉ V 15 ALICE PLACE ORINDA CA 94536	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tess	E N.	CREW	S	D -enange	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MIHM, EDWIN R FOUR EMBARCADERO CENTER, SAN FRANCISCO CA 94111	TITLE NAME STREET ADDRESS CITY-ST-ZIP		. -			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SC NORD, THOMAS C FOUR EMBARCADERO CENTER, SAN FRANCISCO CA 94111	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T TINNON, RICHARD M FOUR EMBARCADERO CENTER,	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, 			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAN FRANCISCO CA 94111 V JENKINS-STARK, JOHN 613 MURRAY LANE LAFAYETTE CA 94549	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	,				Change	Addition
TITLE	D WHITE, JAMES G	☐ Delete	TITLE	•				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.

CICMATURE.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THOMAS C. NORD &

2-16-00

4159553340

Daytime Phone #