2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F97000006402 DOCUMENT #

Country

6. Name and Address of Current Registered Agent

FOUR EMBARCADERO CENTER, SUITE 2200

FOUR EMBARCADERO CENTER, SUITE 2200

FOUR EMBARCADERO CENTER, SUITE 2200

SAN FRANCISCO CA 94111

SAN FRANCISCO CA 94111

4 EMBARCADERO CTR #2200

SAN FRANCISCO CA 94111

SAN FRANCISCO CA 94111

TINNON, RICHARD M

GLENN, CURT F

WHITE, JAMES G

VCFO

UPPÉR CREEK INVESTORS, INC.

Principal Place of Business
FOUR EMBARCADERO CENTER. SUITE 2200

SAN FRANCISCO CA 94111

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

NAME

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-7IP

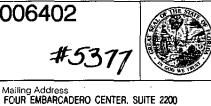
SAN FRANCISCO CA 94111

3. Mailing Address

City & State

Zip ,

Suite, Apt. #, etc.



4,

5. Certificate of Status Desired

7. Name and Address of New Registered Agent

Apr 14, 2003 8:00 am Secretary of State

1880:1040 1510 18151 18011 80111 89161 80161 90161 90166 81655 81616	DII Q BI 7026

CHECK HERE IF MAKING CHANGES		
FEI Number 94-3288900	Applied For	
		Not Applicable

\$8.75 Additional

Fee Required

Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE Delete TITLE Addition CREWS, JESSE V NAME NAME Ron H. Zech 15 ALICE PLACE STREET ADDRESS STREET ADDRESS 500 West Monroe ORINDA CA 94536 CITY-ST-ZIP CITY-ST-ZIP Chicago, IL 60661 Detete TITLE ☐ Addition TITI F ☐ Change MIHM. EDWIN R NAME NAME FOUR EMBARCADERO CENTER, SUITE 2200 STREET ADDRESS STREET ADDRESS SAN FRANCISCO CA 94111 £ITY-ST-ZIP CITY-ST-ZIP VSC . Delete DRE. Change ☐ Addition TITLE NORD, THOMAS C

NAME

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Delete

STREET ADDRESS

STREET ADDRESS,

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

CITY-ST-7IP

CITY-ST-7IP

Country

CITY-ST-ZIP 12. 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 10 or Block 11 if

SIGNATURE:

William J. Hasek

500 West Monroe

Chicago, IL 60661

Change

Change

Change

Addition

☐ Addition

Addition