

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006 8:00 am
Secretary of State

03-06-2006 90024 015 ****70.00

DOCUMENT # F98000002632

1. Entity Name
DELTA DENTAL OF CALIFORNIA, CORPORATION



Principal Place of Business
**100 FIRST ST., MS 15L
SAN FRANCISCO, CA 94105**

Mailing Address
**100 FIRST ST., MS 15L
SAN FRANCISCO, CA 94105**

40025112



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01252006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
94-1461312

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

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name

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

City

FL

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

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCEO
RADINE, GARY D
100 FIRST ST., MS 15L
SAN FRANCISCO, CA 94105** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BARTH, ANTHONY S
100 FIRST STREET
SAN FRANCISCO, CA 94105** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
BECKER, ROBERT G ESQ
100 FIRST STREET
SAN FRANCISCO, CA 94105** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
DAUN, LOWELL G D.D.S.
7667 FOLSON BLVD.
SACRAMENTO, CA 95826** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
HOLCOMBE, JERRY R
100 FIRST ST., MS 15L
SAN FRANCISCO, CA 94105** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VT
CASTRO, MICHAEL J
100 FIRST ST., MS 15L
SAN FRANCISCO, CA 94105** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**Executive Vice President
Marilynn G. Belek
100 First Street
San Francisco, CA 94105** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP
Patrick S. Steele
100 First Street
San Francisco, CA 94105** ☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert G. Becker, EVP/CLO

Date

Daytime Phone #



ATTACHMENT

40025112

www.deltadentalca.org

#F98000002632

February 24, 2006

State of Florida
Division of Corporations
Tallahassee, FL 32302-1500

Re: Delta Dental of California
2006 Annual Report

To Whom It May Concern:

Delta Dental of California's 2006 Annual Report is enclosed. Also enclosed is Delta's check #2030597 to cover the \$61.25 filing fee in addition to the \$8.75 fee for a certificate of status.

Please contact the undersigned with questions or comments regarding this submission.
Thank you.

Cordially,

Debra R. Chamblee
Assistant to EVP/Chief Legal Officer
415. 972. 8494
415. 972. 8483 FAX
dchamblee@delta.org

Enclosure

Delta Dental of California
Headquarters Office:
100 First Street
San Francisco, CA 94105
Telephone: 415-972-8300

Southern California
Sales/Customer Service:
P.O. Box 3370
Cerritos, CA 90703
12858 Towne Center Drive
Cerritos, CA 90703
Telephone: 562-403-4040

Commercial Programs
Claims Processing/
Customer Service:
P.O. Box 997330
Sacramento, CA 95899-7330

Offices in:
Cerritos, Fresno,
Rancho Cordova,
San Diego and
San Francisco

