PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F98000005036

OLD NAVY INC.

FILED Jul 30, 1999 8:00 am Secretary of State

07-30-1999 90003 021 ***550.00

298860 - 90003 - 21

| | | | | | | |)) 11 2)) 131))2 1 | | (11) 11))? | | |
|---|--|----------------------------------|-------------|------------------------|----------------------------|--|---------------------------|-------------------------------------|---------------------|---|--------|
| Principal Place of Business Mailing Address | | | | | | | ici adeii däiit I | -i#i G iil | | IS ETH 1881 | |
| ONE HARRISO | n street | ONE HARRISON STREET | | | | Į. | | | | | |
| SAN FRANCISCO CA 94107 | | SAN FRANCISCO CA 94107 | | | DO NOT WRITE IN THIS SPACE | | | | | | |
| | | | | | | | E IN THIS S | PACE | | | 7 |
| | | | | | | 3. Date Incorporated or Qualified 09/08/1998 | | | | | |
| 2. Principal Pl | lace of Business | 2a. Mailing Address | | | | | | Applie | d For | 7 | |
| 21 | | 26 900 CHERRY AVENUE | | | NIL | 94-3288283 | 94-3288283 Not / | | | oplicable | 7 |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | \Box | \$8.7 | 5 Addi | itional | 7 |
| 22 | ·~ | 27 MIC: 1TX5 | | | | 5. Certificate of Status Desired | | Fe | e Requi | red |] |
| City & State | e | City & State | | | | 6. Election Campaign Financing | | \$5. | 00 ма | у Ве | 7 |
| 23 | | 28 SAN BRUNO CA. | | | | Trust Fund Contribution | | | | | |
| Zip | Country | Zip | Cou | | | 8. This corporation owes the curre | ent year | | | 1 | |
| 24 | 25 | 29 94066 | 30 | _ | | Intangible Personal Property. Yes No | | | | | |
| | Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Re | gistered A | gent | | | 4 |
| 001 | DOOLTION OFFICE OOME | 4 | | 81 Na | me | | , | | | | 1 |
| CORPORATION SERVICE COMPANY | | | | 82 Str | eet Addre | ss (P.O. Box Number is Not Acceptat | ole) | | | | ٦, |
| | 1 HAYS STREET | | [] | | | oo (1 to: Box Hallipor is 110t t looptal | | | | | |
| TAL | LAHASSEE FL 32301-2525 | | | 83 | | | | | _ | | 1 |
| | | | | 04 0" | | | | los I | Zip Cod | | ┨ |
| | | | | 84 Cit | у | | FL | 85 | داب Cou | e | ļ |
| 11. Pursuant | to the provisions of sections 607.0502 | 2 and 607,1508, Florida Statutes | s, the ab | ove-nam | ed corpora | ation submits this statement for the pur | pose of cha | nging i | ts regist | ered | 7 |
| office or | registered agent, or both, in the State am familiar with, and accept the obliga | of Florida. Such change was a | uthorized | l by the | corporatio | n's board of directors. I hereby accept | the appoint | ment a | s regist | ered | Ì |
| _ | am tamiliai with, and accept the obliga | auons of, section 607.0505, Fio | iua Stat | Jies. | | | | | | | ļ |
| SIGNATURE | Signature, typed or printed name of registered agen | t and title if applicable. (NO | TE: Registe | ed Agent si | gnature requir | red when reinstating) | DATE | | | | ءا |
| 12. | OFFICERS AND DIRECTORS | | 13. | 13. | | ADDITIONS/CHANGES TO OFF | ICERS AND | DIRE | CTORS | IN 12 | 1 6 |
| TITLE | C | DELETE | 1.1 70 | LE | | · | | _ Char | nge 🗀 | Addition | 7 4 |
| NAME | Fisher, Donald G | | 1.2 NA | ME | | , | | | | | DOE034 |
| STREET ADDRESS | ONE HARRISON STREET | | 1.3 \$1 | REET ADDR | ess | | | | | | Ĭ |
| CITY-ST-ZIP | SAN FRANCISCO CA | | 1.4 CI | Y-ST-ZIP | | | | | | | Ì |
| TITLE | P | DELETE | 2.1 TIT | LE | | | | Char | nge [| Addition | 7~ |
| NAME | DREXLER, MILLARD S | <u> </u> | 2.2 NA | ME | 1 | | | | • | | 1 |
| STREET ADDRESS | ONE HARRISON STREET | | 2.3 ST | REET ADDR | ess | | | | | | 1 |
| CITY-ST-ZIP | SAN FRANCISCO CA | • | 2.4 GI | Y-ST-ZIP | | - | | | | | 1 |
| TITLE | VS | PELETE | 3.1 TI1 | | | | | Char | nge [| Addition | 1 |
| NAME | GUST, ANNE B | <u></u> | 3.2 NA | ME | | | | | | | |
| STREET ADDRESS | ONE HARRISON STREET | | 3.3 ST | REET ADDR | ≣SS | | | | | | |
| CITY-ST-ZIP | SAN FRANCISCO CA | | | Y-ST-ZIP | | | | | | | |
| TITLE | VT | DELETE | 4.1 TIT | | | | | Char | nge | Addition | 1 |
| NAME | BARNES, LEROY | ☐ DETEI© | 4.2 NA | | | | £ | 51101 | .a | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 1 |
| STREET ADDRESS | 900 CHERRY AVENUE | | | REET ADDR | ss | | | | | | İ |
| | SAN BRUNO CA | | | Y-ST-ZIP | | | | | | | |
| CITY-ST-ZIP | V | DELETE | 5.1 TI | | _ | | | Char | | Addition | 1 |
| NAME | JOHNSON, BARBARA | | 5.2 NA | | | | L. | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | -gc L_ | 1 Modition | 1 |
| | 900 CHERRY AVENUE | | E | REET ADDR | =88 | | | | | | - |
| STREET ADDRESS | SAN BRUNO CA | | | KEET AUUR 'Y-ST-ZIP | -30 | | | | | | |
| CITY-ST-ZIP TITLE | V | Посите | 6.1 TIT | | - | | | ا داد | | Addition | + |
| ì | WHISMAN, J M | DELETE | 6.2 NA | | 1 | | L | _ Char | ige [| Addition | 1 |
| NAME | 900 CHERRY AVENUE | | | | -00 | | | | | | |
| STREET ADDRESS | SAN BRUNO CA | | | REET ADDR | =>> | | | | | | |
| CITY-ST-ZIP | JAN BRUNU LA | | ■ 6.4 CF | Y-ST-ZIP | 1 | | | | | | 1 |

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.

SIGNATURE:

7/14/49 (450)952.446
Daytime Phone #