

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 04, 2002 8:00 am
Secretary of State

02-04-2002 90109 006 ***150.00

DOCUMENT # F98000005794

1. Entity Name

AMERICAN RECOVERY SERVICE INCORPORATED OF CALIFORNIA

Principal Place of Business

**468 PENNSFIELD PLACE 2ND FLOOR
 THOUSAND OAKS CA 91360**

Mailing Address

**468 PENNSFIELD PLACE 2ND FLOOR
 THOUSAND OAKS CA 91360**

2. Principal Place of Business

555 St. Charles Drive

Suite, Apt. #, etc.

100

City & State

Thousand Oaks, CA

Zip

91360

Country

USA

3. Mailing Address

555 St. Charles Drive

Suite, Apt. #, etc.

100

City & State

Thousand Oaks, CA

Zip

91360

Country

USA

4. FEI Number

95-4080279

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**NRAI SERVICES INC.
 526 E PARK AVE
 TALLAHASSEE FL 32301**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

**FILE NOW!!! FEE IS \$150.00
 After May 1, 2002 Fee will be \$550.00
 Make Check Payable to Department of State**

10. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CPD
 BAXTER, THOMAS C
 468 PENNSFIELD PLACE 2ND FLOOR
 THOUSAND OAKS CA 91360**

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**WST
 BERKE, MICHAEL N
 468 PENNSFIELD PLACE 2ND FLOOR
 THOUSAND OAKS CA 91360**

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

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 CITY-ST-ZIP

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TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**CPD
 Baxter, Thomas C
 555 St. Charles Dr. #100
 Thousand Oaks, CA 91360**

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**VSTD
 Berke, Michael N
 555 St. Charles Dr #100
 Thousand Oaks, CA 91360**

☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ Change ☐ Addition

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 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☐ 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)(f), 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.

SIGNATURE:

Thomas C. Baxter

1-14-02

805-379-8500

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)