

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jul 14, 2003 8:00 am
Secretary of State

07-14-2003 90326 050 ***558.75

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DOCUMENT # F99000000834

1. Entity Name
WHALEN & COMPANY, INC.



Principal Place of Business Mailing Address
630 NO. ROSEMEAD BLVD PASADENA CA 91107 **630 NO. ROSEMEAD BLVD PASADENA CA 91107**

2. Principal Place of Business 3. Mailing Address
3475 E. Foothill Blvd. 3475 E. Foothill Blvd.
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
Pasadena, CA Pasadena, CA
 Zip Country Zip Country
91107 U.S. 91107 U.S.



CHECK HERE IF MAKING CHANGES

4. FEI Number **94-3273159** Applied For Not Applicable

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 _____ (NOTE: Registered Agent Signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUSH, MICHAEL C 3675 MT DIABLO BLVD., STE 360 LAFAYETTE CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS CASSEL, GARY R 3675 MT DIABLO BLVD., STE 360 LAFAYETTE CA	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LEMMON, RICHARD A 670 N ROSEMEAD BLVD PASADENA CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JASKA, JAMES M 670 N ROSEMEAD BLVD PASADENA CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HWANG, LI S 670 N ROSEMEAD BLVD PASADENA CA	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3475 E. Foothill Blvd. Pasadena, CA 91107	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President 3475 E. Foothill Blvd. Pasadena, CA 91107	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3475 E. Foothill Blvd. Pasadena, CA 91107	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer David W. King 3475 E. Foothill Blvd. Pasadena, CA 91107	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard A. Lemmon **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **Richard A. Lemmon**
 Date **7-8-03** Daytime Phone # **626/351-4444**

CR2E034 (10/02)