

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02969 (8)

1. Corporation Name

PAN PACIFIC DEVELOPMENT (FLORIDA) INC.



Principal Place of Business

1631-B S. MELROSE DRIVE
VISTA CA 92083

Mailing Address

1631-B S. MELROSE DRIVE
VISTA CA 92083

3. Date Incorporated or Qualified

07/19/1989

3a. Date of Last Report

01/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DC
NAME SHERMAN, THEODORE I
STREET ADDRESS 131 BLOOR ST #300
CITY-ST-ZIP TORONTO, ONTARIO CANADA M5S -1R1

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE DP
NAME TANZ, STUART A
STREET ADDRESS 1631-B S MELROSE DR
CITY-ST-ZIP VISTA CA 92083

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE DS
NAME BILLINGSLEY, JAMES E
STREET ADDRESS 1145 E SUNSET DR SUITE 110
CITY-ST-ZIP BELLINGHAM WA

☒ DELETE

3.1 TITLE D/S/V
3.2 NAME David L. Adlard
3.3 STREET ADDRESS 1631-B S. Melrose Drive
3.4 CITY-ST-ZIP Vista, CA 92083

☒ Change ☒ Addition

TITLE VC
NAME MCMERTY, BRIAN J
STREET ADDRESS 1145 E SUNSET DR SUITE 110
CITY-ST-ZIP BELLINGHAM WA 98226

☒ DELETE

4.1 TITLE V
4.2 NAME Laurie A. Sneve
4.3 STREET ADDRESS 1631-B S. Melrose Drive
4.4 CITY-ST-ZIP Vista, CA 92083

☒ Change ☒ Addition

TITLE V
NAME STAUFFER, JEFFREY S.
STREET ADDRESS 1631-B S MELROSE DR
CITY-ST-ZIP VISTA CA

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

David L. Adlard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/96

619-727-1002

Date

Daytime Phone

CR2E034 (12/95)