

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jun 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # M22309 (2) 1. Corporation Name GLENCO EXECUTIVE CENTER, INC.		

Principal Place of Business 414 N. CENTRAL AVE. GLENDALE CA 91203 US	Mailing Address PO BOX 1709 #M-726 GLENDALE CA 91209 US
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2. Principal Place of Business 21 Suite, Apt. #, etc 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent WEISS, SUZANNE 115 SE 13TH ST STE C FT. LAUDERDALE FL 33316	
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 10/22/1985	
4. FEI Number 59-2660776	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ (PRINT) _____ (REGISTERED AGENT SIGNATURE REQUIRED WHEN REINSTATING) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	☐ Change ☐ Addition
NAME	HESS, TERRY D.	1.2 NAME	
STREET ADDRESS	414 N. CENTRAL AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA	1.4 CITY-ST-ZIP	
TITLE	TD	2.1 TITLE	☐ Change ☐ Addition
NAME	HAYNES, JOHN E.	2.2 NAME	
STREET ADDRESS	414 N. CENTRAL AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	☐ Change ☐ Addition
NAME	ELLER, JAMES R. J	3.2 NAME	
STREET ADDRESS	401 N. BRAND BLVD., #M-726	3.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA	3.4 CITY-ST-ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	BARROR, MELVIN F.	4.2 NAME	
STREET ADDRESS	121 W LEXINGTON DRIVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	PINK, RICHARD A.	5.2 NAME	
STREET ADDRESS	414 N. CENTRAL AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	GLENDALE CA	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 supplemented 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 _____ (PRINT) _____ (REGISTERED AGENT SIGNATURE REQUIRED WHEN REINSTATING) _____ DATE _____

CR2E034 (10/97)