**FILED** Jan 22, 2008 08:00 A Secretary of State

## DOCUMENT # P00355

CONAM MANAGEMENT CORPORATION



Principal Place of Business

3990 RUFFIN ROAD SUITE 100 ATTN: LEGAL SAN DIEGO, CA 92123

Mailing Address

3990 RUFFIN ROAD SUITE 100 ATTN: LEGAL SAN DIEGO, CA 92123



DO NOT WRITE IN THIS SPACE

01032008 No Chg-P CR2E034 (11/05)

Applied Fo 4. FEI Number 95-3809553 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET **SUITE 105** TALLAHASSEE, FL 32301

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

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	The above named entity submits this statement for the purpose of changing the obligations of registered agent.	ng its registered affice or registered agen	it, or both.	in the State of Florida.	I am familiar with, a	nd accept
SIG	GNATURE	(NOTE: Registered Agent signature required when reins	itating)	U00000	<del>291453</del>	

FILE NOW!!! FEE IS \$150.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

<del>/23/08-80076 016 138.</del>

After May 1, 2008 Fee will be \$550.00

10. OFFICERS AND DIRECTORS TITLE CD EPSTEIN, DANIEL J. NAME STREET ADDRESS 3990 RUFFIN ROAD, SUITE 100 CITY-ST-ZIP **SAN DIEGO, CA 92123** SV TILE DUPREE, E. SCOTT NAME STREET ADDRESS 3990 RUFFIN ROAD, SUITE 100 SAN DIEGO, CA 92123 CITY-ST-ZIP TV TITLE TILLEY, RALPH W NAME STREET ADDRESS 3990 RUFFIN ROAD, SUITE 100 CITY-ST-ZIP SAN DIEGO, CA: 92123

SVATOS, ROBERT J NAME STREET ADDRESS 3990 RUFFIN ROAD, SUITE 100 CITY-ST-ZIP SAN DIEGO, CA 92123 TITLE FERRY, RICHARD M NAME STREET ADDRESS 3990 RUFFIN ROAD, SUITE 100 CITY-ST-ZIP SAN DIEGO, CA 92123

TITLE FORRESTER, J. BRADLEY NAME 3990 RUFFIN ROAD, SUITE 100 STREET ADDRESS CITY-ST-ZIP SAN DIEGO, CA 92123

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

TITLE

Daytime Phone #