FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR 25 AM 10:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P00784** **(9)**

1. Corporation Name
ANDERSON DEBARTOLO PAN, INC.

Principal Place of Business	Mailing Address
2400 N. ARCADIA AVE. TUCSON AZ 85712	2400 N. ARCADIA AVE. TUCSON AZ 85712

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **02/01/1984**
3a. Date of Last Report: **04/05/1994**

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 County 30

4. FEI Number: **86-0257162** ☐ 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

7. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. 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 duties and responsibilities of registered agent. Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature of new registered agent (if applicable) NOTE: Registered Agent signature required when reinstating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VSD ANDERSON, RICHARD L. 4520 HACIENDA DE SOL TUCSON AZ	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY ST ZIP	VD Martin Yeaman 3238 Victor Court San Jose, CA 95132	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	D MARSHALL, JOHN L III ← Delete 760 ELMGROVE AVE. PROVIDENCE RI	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY ST ZIP	VD Harris, Michael 4540 N. Via Masina Tucson, AZ 85715	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VD PAN, SOLOMON 640 DAVIS ST, #23 SAN FRANCISCO CA	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	PD HARMAN, DALE D. 2232 E CERRADA BALA TUCSON AZ	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VTD OWEN, PHILIP 7305 E. SHOREWARD LOOP TUCSON AZ	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY ST ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY ST ZIP	VD MICHAEL, STANLEY E 5117 N PONTATOC TUCSON AZ	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY ST ZIP	11628 E. Del Timbre Drive Scottsdale, AZ 85259	☒ 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)(i), 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: _____ Philip T. Owen 4-14-95 602-795-4500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0491R0 FN