

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90042 016 ***150.00

DOCUMENT # P13619 1. Entity Name INQUIP ASSOCIATES, INC.					
Principal Place of Business 2100 ANACAPA ST. SANTA BARBARA, CA 93105			Mailing Address 2100 ANACAPA ST. SANTA BARBARA, CA 93105		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01122004 Chg-P CR2E034 (10/03)	
4. FEI Number 95-3103923				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324			7. Name and Address of New Registered Agent Name INCORP SERVICES, INC Street Address (P.O. Box Number is Not Acceptable) 103 NORTH MERIDIAN ST City TALLAHASSEE FL Zip Code 32301		
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. CHANGE OF REGISTER AGENT FILED 2-19-04 (SEE ATTACHED) SIGNATURE WITH PAYMENT OF \$5.00 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD HENSGEN, OSCAR E. 2100 ANACAPA ST. SANTA BARBARA, CA	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HENSGEN, ELIZABETH J. 2100 ANACAPA ST. SANTA BARBARA, CA	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NAMY, DOMINIQUE L 1001 GELSTON CRCL. MCLEAN, VA	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TILTGES, DANIEL J. 711 BURNINGTREE LANE ARLINGTON HEIGHTS, IL	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Blank]	☐ Delete			
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: <i>[Signature]</i> Date 3-1-04 Daytime Phone # 805-687-2007		

ATTACHMENT

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
CORPORATIONS

#P13619
44014285

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Nevada in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Inquip Associates, inc.
2. The principal office address: 2100 Anacapa Street
Santa Barbara, CA 93105
3. The mailing address (if different): P. O. Box 2182, Santa Barbara, CA 93120
4. Date of incorporation/qualification: 03/16/1987 Document number: P13619
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

CT Corporation System

1200 S. Pine Island Road

Plantation, FL 33324

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Incorp Services, Inc.

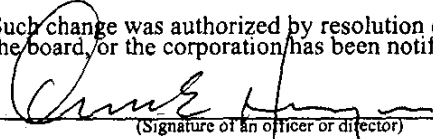
103 North Meridian Street

(P.O. Box or personal mailbox NOT acceptable)

Tallahassee, FL 32301

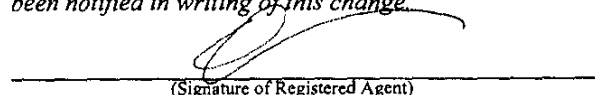
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

OSCAR E. HENSHAW, PRESIDENT
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

2-19-04
(Date)

If signing on behalf of an entity:

Doug Ansell
(Typed or Printed Name)

Director of Operations
(Capacity)

*** FILING FEE: \$35.00 ***

643000
NEXT

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

attachment

#P13619
44014285

INQUIP ASSOCIATES, INC.

031821

CHECK DATE: 02/20/2004 CHK #: 31821 VEND: FLCOR FLORIDA DEPT OF STATE

INV DATE	INV NUMBER	INV AMOUNT	DISC AMT	RET AMT	NET AMOUNT
02/01/04	2004 REG	35.00			35.00

TOTAL:	35.00	0.00	0.00	35.00
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