

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P16151 (3)**

1. Corporation Name

GREAT WESTERN CAPITAL CORPORATION



Principal Place of Business

**9401 OAKDALE AVE.
MAIL STOP #N 08 14
CHATSWORTH CA 91311-6512**

Mailing Address

**9401 OAKDALE AVENUE
MAIL STOP #N08 14
CHATSWORTH CA 91311-6512
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

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

3. Date Incorporated or Qualified
09/29/1987

3a. Date of Last Report
03/15/1995

4. FEI Number
95-4122645

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ 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

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 blank applicator.

(NOTE: Registered Agent Signature required when not of the)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME **DP
GEUTHER, CARL**
STREET ADDRESS **9200 OAKDALE AVE.**
CITY-ST-ZIP **CHATSWORTH CA 91311**

TITLE ☐ DELETE

NAME **DVS
ADAMS, STEPHEN F**
STREET ADDRESS **9200 OAKDALE AVE.**
CITY-ST-ZIP **CHATSWORTH CA 91311**

TITLE ☐ DELETE

NAME **D
PALKO, MICHAEL J**
STREET ADDRESS **9200 OAKDALE AVE.**
CITY-ST-ZIP **CHATSWORTH CA 91311**

TITLE ☐ DELETE

NAME **DVS
ERIKSON, J L**
STREET ADDRESS **9200 OAKDALE AVE.**
CITY-ST-ZIP **CHATSWORTH CA 91311**

TITLE ☒ DELETE

NAME **VCEO
STALK, IRWIN**
STREET ADDRESS **9200 OAKDALE AVENUE**
CITY-ST-ZIP **CHATSWORTH CA**

TITLE ☐ DELETE

NAME **VS
SPRINGER, VICKI**
STREET ADDRESS **9401 OAKDALE AVE.**
CITY-ST-ZIP **CHATSWORTH CA 91311**

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

EVP and CEO

**Frederick H. Robins
9200 Oakdale Avenue
Chatsworth, CA 91311**

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:

Vicki Springer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VP-Oper., Asst. Sec.

03/18/96

818-775-7703

Date

Executive Phone #

CR2E034 (12/95)