

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

DOCUMENT # **P29487** (6)

1. Corporation Name

WILBUR-ELLIS COMPANY

MAY -1 11 0:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

**BOX 7454
SAN FRANCISCO CA 94120-7454
US**

Mailing Address

**BOX 7454
SAN FRANCISCO CA 94120-4454**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

05/22/1990

3a. Date of Last Report

06/22/1994

4. FEI Number

94-0981840

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

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

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 607.1504, 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 name, title, and address of registered agent or the filer, as applicable)

(Print name, title, and address of registered agent or the filer, as applicable)

(Date)

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

**C
THACHER, CARTER P.
3660 CLAY STREET
SAN FRANCISCO CA**

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

**P
WILBUR, BRAYTON, JR.
821 IRWIN DR.
HILLSBOROUGH CA**

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

**VP
BROWN, FRANK M.
1031 BOLINGER ROAD
MORAGA CA**

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

**V
BOYER, KEITH G.
RR 4 BEAVERDALE HEIGHTS
WEST BURLINGTON IA**

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

**S
KRONEBERG, INGRID
15-D OLIVA DR.
NOVATO CA**

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

**AT
HANNAN, JOHN C.
534 KENYON AVENUE
KENSINGTON CA**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY ST ZIP

☐ Change ☐ Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY ST ZIP

☐ Change ☐ Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY ST ZIP

☐ Change ☐ Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY ST ZIP

☒ Change ☐ Addition

**VICE-PRESIDENT
Gary Datto
1547 N. Oakmore
Tulane CA 93274**

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY ST ZIP

☐ Change ☐ Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY ST ZIP

☐ 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(9)(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 transfer empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, as applicable, or on an attachment with an address.

SIGNATURE:

John C. Hannan
John C. Hannan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95

(415) 772-4125