

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

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # P31889

(9)

1. Corporation Name

BANKAMERICA CORPORATION

Principal Place of Business

**555 CALIFORNIA ST.
SAN FRANCISCO CA 94104
US**

Mailing Address

**555 CALIFORNIA ST.
SAN FRANCISCO CA 94104**

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 APR -3 PM 1:02

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 08/17/1990	3a. Date of Last Report 03/30/1994
4. FEI Number 94-1681731	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	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 799 Market St., Dept 13025C
22 City & State	27 City & State San Francisco, CA
23 Zip	28 Zip 94103
24 Country	29 Country USA

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEMS
1200 SOUTH PINE ISLAND
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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 date of appointment

NOTE: Registered Agent signature required when reappointing

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CP	1. TITLE	☐ Change ☐ Addition
NAME	ROSENBERG, RICHARD M.	2. NAME	
STREET ADDRESS	555 CALIFORNIA ST.	3. STREET ADDRESS	
CITY - ST - ZIP	SAN FRANCISCO CA	4. CITY - ST - ZIP	
TITLE	VC	21. TITLE	☐ Change ☐ Addition
NAME	COLEMAN, LEWIS W.	22. NAME	
STREET ADDRESS	555 CALIFORNIA ST.	23. STREET ADDRESS	
CITY - ST - ZIP	SAN FRANCISCO CA	24. CITY - ST - ZIP	
TITLE	SVP	31. TITLE	EVP ☒ Change ☐ Addition
NAME	SOROKIN, CHERYL	32. NAME	
STREET ADDRESS	555 CALIFORNIA ST.	33. STREET ADDRESS	
CITY - ST - ZIP	SAN FRANCISCO CA	34. CITY - ST - ZIP	
TITLE	EVP	41. TITLE	☐ Change ☐ Addition
NAME	PETERS, RAYMOND R	42. NAME	
STREET ADDRESS	555 CALIFORNIA ST.	43. STREET ADDRESS	
CITY - ST - ZIP	SAN FRANCISCO CA	44. CITY - ST - ZIP	
TITLE	SVP	51. TITLE	EVP ☒ Change ☐ Addition
NAME	ARNOLD, DOYLE L	52. NAME	
STREET ADDRESS	555 CALIFORNIA ST.	53. STREET ADDRESS	
CITY - ST - ZIP	SAN FRANCISCO CA	54. CITY - ST - ZIP	
TITLE		61. TITLE	AT (Asst. Treasurer) ☐ Change ☒ Addition
NAME		62. NAME	Francis S. Ryan
STREET ADDRESS		63. STREET ADDRESS	799 Market St.
CITY - ST - ZIP		64. CITY - ST - ZIP	San Francisco, CA 94103

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)(b), 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:

Francis S. Ryan

Francis S. Ryan

3/1/95

(415) 622-1520

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number