

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Jan 22 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P34903 (5)

1. Corporation Name
ST. JOHN KNITS, INC.

Principal Place of Business

2722 MICHELSON DR.
IRVINE CA 92612
US

Mailing Address

2722 MICHELSON DR.
IRVINE CA 92612-1603
US

3. Date Incorporated or Qualified

07/30/1991

3a. Date of Last Report

10/07/1996

4. FEI Number

95-2245070

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

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 607.1508, 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 title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V ☐ DELETENAME GRIFFITHS, DIANE M.
STREET ADDRESS 17422 DERIAN AVENUE
CITY-ST-ZIP IRVINE CATITLE V ☐ DELETENAME GUYER, KARLA R.
STREET ADDRESS 17422 DERIAN AVENUE
CITY-ST-ZIP IRVINE CATITLE D ☐ DELETENAME KRINSKY, DAVID A.
STREET ADDRESS 18881 VON KARMAN 16TH FLOOR
CITY-ST-ZIP IRVINE CATITLE CDS ☐ DELETENAME GRAY, MARIE
STREET ADDRESS 17422 DERIAN AVENUE
CITY-ST-ZIP IRVINE CATITLE V ☐ DELETENAME RUPPERT, ROGER G
STREET ADDRESS 17422 DERIAN AVENUE
CITY-ST-ZIP IRVINE CATITLE DP ☐ DELETENAME GRAY, KELLY
STREET ADDRESS 17422 DERIAN AVENUE
CITY-ST-ZIP IRVINE CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DC ☐ Change ☒ Addition1.2 NAME Gray, Bob
1.3 STREET ADDRESS 17422 Derian Avenue
1.4 CITY-ST-ZIP Irvine, CA 926142.1 TITLE V ☐ Change ☒ Addition2.2 NAME Frankel, David
2.3 STREET ADDRESS 17422 Derian Avenue
2.4 CITY-ST-ZIP Irvine, CA 926143.1 TITLE V ☐ Change ☒ Addition3.2 NAME Moore, Michael
3.3 STREET ADDRESS 17422 Derian Avenue
3.4 CITY-ST-ZIP Irvine, CA 926144.1 TITLE V ☐ Change ☒ Addition4.2 NAME Fetter, Bruce
4.3 STREET ADDRESS 17422 Derian Avenue
4.4 CITY-ST-ZIP Irvine, CA 926145.1 TITLE DV ☒ Change ☐ Addition5.2 NAME Ruppert, Roger G.
5.3 STREET ADDRESS 2722 Michelson Drive
5.4 CITY-ST-ZIP Irvine, CA 926126.1 TITLE D ☐ Change ☒ Addition6.2 NAME Gadbois, Richard
6.3 STREET ADDRESS 4695 MacArthur Ct., Suite 1600
6.4 CITY-ST-ZIP Newport Beach, CA 92658

14. I do 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roger G. Ruppert 1/13/97

(714) 223-3300

Date

Daytime Phone #

CR2E034 (9/96)