FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

'95 MAR 21 PM 3:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P39099** **(7)**

1. Corporation Name

WILSEY BENNETT, INC.

Principal Place of Business	Mailing Address
2351 POWELL ST. SUITE 500 SAN FRANCISCO CA 94133 US	P.O. BOX 3532 SAN FRANCISCO CA 94119 US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 06/02/1992
3a. Date of Last Report: 05/01/1994

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22)
Suite, Apt. #, etc. (27)
City & State (23)
City & State (28)
Zip (24) Country (25)
Zip (29) Country (30)

4. FEI Number: 95-2261288 ☐ 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

C T CORPORATION SYSTEM
1200 SOUTH 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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CFO	1.1 TITLE		☐ Change ☐ Addition
NAME	WILSEY, MICHAEL W.	1.2 NAME		
STREET ADDRESS	2351 POWELL STREET #500	1.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA	1.4 CITY-ST-ZIP		
TITLE	VD	2.1 TITLE		☐ Change ☐ Addition
NAME	WILSEY, ALFRED S. SR	2.2 NAME		
STREET ADDRESS	2351 POWELL STREET #500	2.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA	2.4 CITY-ST-ZIP		
TITLE	D	3.1 TITLE		☐ Change ☐ Addition
NAME	SOLARI, JEROME P	3.2 NAME		
STREET ADDRESS	2351 POWELL S T., STE. 500	3.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA	3.4 CITY-ST-ZIP		
TITLE	VTD	4.1 TITLE		☐ Change ☐ Addition
NAME	ANDERSON, WILLIAM R,	4.2 NAME		
STREET ADDRESS	2351 POWELL STREET #500	4.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA	4.4 CITY-ST-ZIP		
TITLE	AS	5.1 TITLE	Vice President/Secretary	☒ Change ☐ Addition
NAME	CARRIGAN, DALE K.	5.2 NAME	Dale K. Carrigan	
STREET ADDRESS	2351 POWELL STREET #500	5.3 STREET ADDRESS	2351 Powell St., Ste. #500	
CITY-ST-ZIP	SAN FRANCISCO CA	5.4 CITY-ST-ZIP	San Francisco, CA 94133	
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	POETT, HENRY W III	6.2 NAME		
STREET ADDRESS	2351 POWELL ST., STE. 500	6.3 STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA	6.4 CITY-ST-ZIP		

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)(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: _____ Dale K. Carrigan March 4, 1995 (415) 391-4160
MANDATORY ANNUAL REPORT OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Secretary — Date — Daytime Phone #

0493000 FN