

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000005338

FILED  
Jan 04, 2005  
Secretary of State

Entity Name: APMC REALTY, INC.

**Current Principal Place of Business:**

26901 AGOURA RD  
200  
CALABASAS HILLS, CA 91301 US

**New Principal Place of Business:**

**Current Mailing Address:**

26901 AGOURA RD  
200  
CALABASAS HILL, CA 91301 US

**New Mailing Address:**

FEI Number: 95-4537645      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
526 E. PARK AVE.  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: LEVINE, HOWARD J  
Address: 26901 AGOURA RD, STE 200  
City-St-Zip: CALABASAS HILLS, CA 91301

Title: EVP ( ) Delete  
Name: WHITE, TIMOTHY L  
Address: 26901 AGOURA RD, STE 200  
City-St-Zip: CALABASAS HILLS, CA 91301

Title: V ( ) Delete  
Name: KIGER, DONNA  
Address: 26901 AGOURA RD, STE 200  
City-St-Zip: CALABASAS HILLS, CA 91301

Title: SV ( ) Delete  
Name: LEON, HOLLIS J  
Address: 26901 AGOURA RD STE 200  
City-St-Zip: CALABASSAS HILLS, CA 91301

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY L. WHITE

EVP

01/04/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date