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**Mar 17 1997 8:00am  
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P37571 (7)**

1. Corporation Name  
**A.G.I.A., INC.**

Principal Place of Business <b>1155 EUGENIA PLACE CARPINTERIA CA 93013</b>	Mailing Address <b>1155 EUGENIA PLACE CARPINTERIA CA 93013-2061</b>
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3. Date Incorporated or Qualified <b>02/17/1992</b>	3a. Date of Last Report <b>03/20/1996</b>
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country 25	Country 30
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4. FEI Number <b>95-2409500</b>	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**CROCKET, LAURISTON LEE  
7104 FLORIDANA AVENUE  
FLORIDANA BEACH FL 32951**

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	<b>FL</b>

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 by, or if printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS

TITLE	DCP	<input type="checkbox"/> DELETE
NAME	PERRY, ARTHUR L., JR.	
STREET ADDRESS	6957 SHEPARD MESA RD.	
CITY- ST- ZIP	CARPINTERIA CA	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	PUCHMELTER, THOMAS JOHN	
STREET ADDRESS	3913 CAMELLIA LANE	
CITY- ST- ZIP	SANTA BARBARA CA	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	CAPRITTO, JULIETTE L.	
STREET ADDRESS	2625 SAMARKIND DR.	
CITY- ST- ZIP	SANTA BARBARA CA	
TITLE	SEE ADDITIONAL OFFICER ON ATTACHED SHEET	<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Director/President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Arthur L. Perry, Jr.	
1.3 STREET ADDRESS	6957 Shepard Mesa Rd.	
1.4 CITY- ST- ZIP	Carpinteria, CA 93013	
2.1 TITLE	CEO/Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	John Byron Wigle	
2.3 STREET ADDRESS	4188 Foothill Rd.	
2.4 CITY- ST- ZIP	Carpinteria CA 93013	
3.1 TITLE	Secretary/Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	Juliette L. Capritto	
3.3 STREET ADDRESS	1914 Coyote Circle	
3.4 CITY- ST- ZIP	Santa Barbara CA 93108	
4.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	David H. Mc Carty	
4.3 STREET ADDRESS	8728 Norwood Lane N.	
4.4 CITY- ST- ZIP	Maple Grove MN 55369	
5.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Steven John Roth	
5.3 STREET ADDRESS	5459 Palace Court	
5.4 CITY- ST- ZIP	Santa Barbara CA 93111	
6.1 TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	Marilyn L. Weixel	
6.3 STREET ADDRESS	5422 Throne Court	
6.4 CITY- ST- ZIP	Santa Barbara CA 93111	

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: *Arthur L. Perry Jr.* **3/3/97** (805) 566-9191  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)

**OFFICERS, DIRECTORS AND SHAREHOLDERS FOR A.G.I.A., INC.**

<b>NAME</b>	<b>DATE APPOINTED</b>	<b>ADDRESS</b>	<b>SS #</b>	<b>DESIGNATIONS</b>
JOHN BYRON WIGLE	1/31/97 (ACQUIRED SHARES 1/1/96)	4188 FOOTHILL RD CARPINTERIA CA 93013	567-82-1619	PRINCIPAL OFFICER (CHIEF EXECUTIVE OFFICER) SHAREHOLDER (10 SHARES/ 50%) DIRECTOR
ARTHUR L. PERRY, JR.	1/1/1966	6957 SHEPARD MESA CARPINTERIA CA 93013	012-30-2583	PRINCIPAL OFFICER (PRESIDENT) SHAREHOLDER (10 SHARES/50%), DIRECTOR
JULIETTE L. CAPRITTO	1/1/1986	1914 COYOTE CIRCLE SANTA BARBARA CA 93108	561-25-0952	PRINCIPAL OFFICER (SECRETARY, TREASURER AND VICE PRESIDENT), DIRECTOR
THOMAS J. PUCHMELTER	1/1/91	3913 CAMELLIA LANE SANTA BARBARA CA 93110	342-34-4597	VICE PRESIDENT
DAVID H. MC CARTY	1/31/97	8727 NORWOOD LANE N. MAPLE GROVE MN 55369	391-60-3172	VICE PRESIDENT
STEVEN JOHN ROTH	1/31/97	5459 PALACE COURT SANTA BARBARA CA 93111	572-56-0073	VICE PRESIDENT
EDWARD CHARLES SCHRAM	1/31/97	960 GARCIA ROAD SANTA BARBARA CA 93103	485-42-7499	VICE PRESIDENT ADDITION
MARILYN LOEB WEIXEL	1/31/97	5422 THRONE COURT SANTA BARBARA CA 93111	111-40-7019	VICE PRESIDENT