

## **State of California Secretary of State**

FM49163 Statement of Information

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(Domestic Nonprofit, Credit Union and General Cooperative Corporations)

Filing Fee: \$20.00. If this is an amendment, see instructions.

IMPORTANT – READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

## FILED

In the office of the Secretary of State of the State of California

| 1. CORPORATE NAME   |                                |  |   |
|---|--------------------------------|--|---|
| DOWNTOWN BRENTWOOD COALITION  | MAY-03 2017                    |  |   |
|   |                                | WAT-O  | 2011  |
|   |                                |  |   |
|   |                                | CO (COLORADA ANTA ANTA ANTA ANTA ANTA ANTA ANTA A  |   |
|   |                                | SERVICE UNITAL SERVICE |   |
| 2. CALIFORNIA CORPORATE NUMBER  |                                |  |   |
| C3586045  | This Space for Filing Use Only |  |   |
| Complete Principal Office Address (Do not abbreviate the name of the city. Item 3 car   |                                |  | 710,0005  |
| 3. STREET ADDRESS OF PRINCIPAL OFFICE IN CALIFORNIA, IF ANY   | CITY                           | STATE  | ZIP CODE  |
| 626 FIRST STREET, BRENTWOOD, CA 94513   |                                |  |   |
| 4. MAILING ADDRESS OF THE CORPORATION   | CITY                           | STATE  | ZIP CODE  |
|   |                                |  |   |
|   |                                | 。<br>第二条形式解除的  |   |
|   |                                |  |   |
| Names and Complete Addresses of the Following Officers (The corporation moofficer may be added; however, the preprinted titles on this form must not be altered.)   | ust list thes                  | se three officers. A comparat  | ble title for the specific                          |
| 5. CHIEF EXECUTIVE OFFICER/ ADDRESS   | CITY                           | STATE  | ZIP CODE  |
| JOSH ALDRICH 626 FIRST STREET, BRENTWOOD, CA 94513  |                                |  |   |
| 6. SECRETARY ADDRESS  | CITY                           | STATE  | ZIP CODE  |
| DAFNE SWISHER 626 FIRST STREET, BRENTWOOD, CA 94513   |                                |  |   |
| 7. CHIEF FINANCIAL OFFICER/ ADDRESS   | CITY                           | STATE  | ZIP CODE  |
| DONNA ROSS 626 FIRST STREET, BRENTWOOD, CA 94513  |                                |  |   |
| Agent for Service of Process If the agent is an individual, the agent must reside in C address, a P.O. Box address is not acceptable. If the agent is another corporation, the acceptificate pursuant to California Corporations Code section 1505 and Item 9 must be left blar   | gent must                      | nd Item 9 must be completed have on file with the Californi  | with a California street<br>ia Secretary of State a |
| 8. NAME OF AGENT FOR SERVICE OF PROCESS DONNA ROSS  | segent MUS                     | T have agreed to act initial capac   | ity prior to the designation.]                      |
| 9. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL 626 FIRST STREET, BRENTWOOD, CA 94513   | CITY                           | STATE  | ZIP CODE  |
| Common Interest Developments  |                                |  |   |
| Check here if the corporation is an association formed to manage a common in Development Act, (California Civil Code section 4000, et seq.) or under the Co (California Civil Code section 6500, et seq.). The corporation must file a Statement required by California Civil Code sections 5405(a) and 6760(a). Please see instruction | ommercial<br>by Commo          | and Industrial Common Intel<br>n Interest Development Assoc  | rest Development Act,                               |
| 11. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.   |                                |  |   |
| 05/03/2017 DONNA ROSS DIRECTO   | OR                             |  |   |
| DATE TYPE/PRINT NAME OF PERSON COMPLETING FORM T  | ITLE                           | SIGNAT   | TURE  |
| SI-100 (REV 01/2016)  |                                | APPROVED BY  | Y SECRETARY OF STATE                                |