



Secretary of State
Statement of Information
 (California Nonprofit, Credit Union and
 General Cooperative Corporations)

SI-100

412

19-047832

FILED
Secretary of State
State of California

JUL 01 2019

21/20/PC

This Space For Office Use Only

IMPORTANT — Read instructions before completing this form.

Filing Fee — \$20.00;

Copy Fees — First page \$1.00; each attachment page \$0.50;
 Certification Fee - \$5.00 plus copy fees

1. Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State)

Anaheim First

2. 7-Digit Secretary of State File Number

4265549

3. Business Addresses

| | | | |
|--|---------------------------------------|-------------|-------------------|
| a. Street Address of California Principal Office, if any - Do not enter a P.O. Box 2099 S. State College Boulevard, Suite 650 | City (no abbreviations) Anaheim | State CA | Zip Code 92806 |
| b. Mailing Address of Corporation, if different than Item 3a 455 Capitol Mall, Suite 600 | City (no abbreviations) Sacramento | State CA | Zip Code 95814 |

4. Officers

The Corporation is required to enter the names and addresses of all three of the officers set forth below. An additional title for Chief Executive Officer or Chief Financial Officer may be added; however, the preprinted titles on this form must not be altered.

| | | | | |
|---|------------------------------------|-------------|----------------------|-------------------|
| a. Chief Executive Officer/ Todd | First Name | Middle Name | Last Name Ament | Suffix |
| Address 2099 S. State College Boulevard, Suite 650 | City (no abbreviations) Anaheim | | State CA | Zip Code 92806 |
| b. Secretary Jay | First Name | Middle Name | Last Name Burruss | Suffix |
| Address 2099 S. State College Boulevard, Suite 600 | City (no abbreviations) Anaheim | | State CA | Zip Code 92806 |
| c. Chief Financial Officer/ Amelia | First Name | Middle Name | Last Name Castro | Suffix |
| Address 2099 S. State College Boulevard, Suite 650 | City (no abbreviations) Anaheim | | State CA | Zip Code 92806 |

5. Service of Process (Must provide either Individual OR Corporation.)

INDIVIDUAL – Complete Items 5a and 5b only. Must include agent's full name and California street address.

| | | | |
|--|---------------------------------------|--------------------|-------------------|
| a. California Agent's First Name (if agent is not a corporation) Ashlee | Middle Name N. | Last Name Titus | Suffix |
| b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 455 Capitol Mall, Suite 600 | City (no abbreviations) Sacramento | State CA | Zip Code 95814 |

CORPORATION – Complete Item 5c only. Only include the name of the registered agent Corporation.

c. California Registered Corporate Agent's Name (if agent is a corporation) – Do not complete Item 5a or 5b

6. Common Interest Developments

Check here if the corporation is an association formed to manage a common interest development under the Davis-Sterling Common Interest Development Act (California Civil Code section 4000, et seq.) or under the Commercial and Industrial Common Interest Development Act (California Civil Code section 6500, et seq.). The corporation must file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code sections 5405(a) and 6760(a). See Instructions.

7. The Information contained herein, including in any attachments, is true and correct.

6/28/2019

Katherine C. Jenkins

Attorney-Agent

Katherine C. Jenkins
Signature

Date

Type or Print Name of Person Completing the Form

Title