

# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Division 100 North Main Street Providence, RI 02903-1335 401.222.3040

2005

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR

• Filing Fee: \$50.00 Filing Period: September 1 - November 1 (FORM MUST BE TYPED OR PRINTED IN BIACK) 2. Exact name of the limited liability company DEL NORTE REFI, LLC 100217 4. Brief description of the character of the business which is actually conducted in Rhode Island 3. State of Formation TO OWN, OPERATE, MANAGE, BUY AND SELL REAL ESTATE **ALASKA** 5 Principal office address State 95501 323 FIFTH STREET **EUREKA** CA 6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON: Contact Name Contact Title JUNE L. LOWMAN SENIOR PARALEGAL Street Address State City **EUREKA** 95501 323 FIFTH STREET ÇA 7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ANY MODIFICATIONS TO MANAGERS REQUIRES FILING OF AMENDMENT, R.I.G.L. 7-16-12 (a) (2) / 7-16-52 Manager Name Manager Name Street Address Street Address State  $Z\Phi$ State Z.ip City Manager Name Street Address Street Address Zip City Zip State 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER - Changes require filing of Form 642 - R.I.G.L. 7-16-11 Agent Name Address PRENTICE-HALL CORP SYSTEM Zф WARWICK 222 JEFFERSON BOULEVARD, SUITE 200 02888-

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

*100217*	Under includ
File Daie 9/24/05	conti
Check No. 191437	Signati
FOR SECRETARY OF STATE USE ONLY	ALL Print of

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

Signature of Authorized Verson

9/12/03

Date

ALLAN GRUSHKIN, SENIOR VICE PRESIDENT

Print or Type Name of Authorized Person



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

100 North Main Street Providence, RI 02903-1335 401-222-3040

Corporations Division

LIMITED LIABILITY CON	ΛРА	NY ANNUAL RI	EPORT FOR	THE YEAR	₹ <u> </u>
Filing Period: September 1 - November 1	•	Filing Fee: \$50.00			

(FORM MUST BE TYPED	OR PRINTED IN BLACK)						
I. ID No.	. ID No. 2. Exact name of the limited liability company						
100217	100217 DEL NORTE REFI. LLC						
3. State of Formation	4. Brief description	on of the character of the b	usiness which is actually conducted in Rho	de Island			
ALASKA	TO OWN,OPI	ERATE,MANAGE, BU	Y AND SELL REAL ESTATE AND A	NY OTHER LAWFUL	ACTS		
5. Principal office address			City	State	Zip		
323 Fifth	Street		Eureka	CA	95501		
6. MAILING ADDRE	SS OF LIMITED LIABI	LITY COMPANY AN	D NAME OR TITLE OF CONTACT	PERSON:			
Contact Name			Contact Title	• ***			
June L. L	owman		Senior Paral	legal			
Street Address	· · · · · · · · · · · · · · · · · · ·	· <del>-</del> · -	City	State	Zip		
323 Fifth	Street		Eureka	CA	95501		
7. NAME AND ADDI	RESS OF EACH MANA	GER OF THE LIMIT	ED LIABILITY COMPANY, IF APE	PLICABLE	•		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			G ATTACHMENTS ("X" BOX F		3		
AN'			IRES FILING OF AMENDMENT, I				
Manuger Name			Manager Name	Manager Name			
·			•				
Singl Address			Street Address	Street Address			
City	State	Zlp	: City	State	Zip		
<b>7.</b> ,	J	1.74			,		
Manager Name			: Manager Name				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Sirvet Address	<del></del>		Street Address				
	•						
City	State	Zip	City	State	Zip		
8. RESIDENT AGENT	T IN RHODE ISLAND	- DO NOT ALTER - (	Changes require filing of Form	642 - R.I.G.L. 7-16-	11		
Agent Name			Address				
PRENTICE-HALL CORP SYSTEM			Citi	City Zip			
Address			·	City			
222 JEFFERSON BOU	222 JEFFERSON BOULEVARD, SUITE 200			WARWICK 02888-			
	_						
	·						

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

*	1	0	0	2	1	7	*

File Date 9 27 04

Check No. 18923

By: DA

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

Signature of Authorized Person

9/13/04

Date

Allan Grushkin, Senior Vice President

Print or Type Name of Authorized Person



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State

Matthew A. Brown, Secretary of State

Corporations Diession 100 North Main Street Providence, RI 62903-1335 401-222 3040

# LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR \_ Filing Period: September 1 - November 1 • Filing Fee: \$50.00

2003

(FORM MUST BE TYPFD	OR PRINTED IN BLACK)					
/ //D No						
100217 DEL NORTE REFI, LLC						
1 Mate of Formation	i Brief description	r of the character of the bi	ismess which is actually conducted in Rh	rode Island		
ALASKA	TO OWN,OPE	RATE,MANAGE, BUY	AND SELL REAL ESTATE AND	ANY OTHER LAWFUL A	стѕ	
5 Principal office addres	"		Cu <sub>1</sub>	State	Zψ	
	th Street		Eureka	l ca	95501	
6. MAILING ADDRI	ESS OF LIMITED LIABII	ITY COMPANY ANI	O NAME OR TITLE OF CONTAC	T PERSON:		
Contact Name			Contact Title			
Street Address				State	Z:p	
323 Fif	th Street		Eureka	CA	95501	
AN Manager Name	FILL IN SPA	MANAGERS REQUI	G ATTACHMENTS ("X" BOX RES FILING OF AMENDMENT, Manager Name	R.I.G.L. 7-16-12 (a) (	2) / 7-16-52	
Sucet Address			Street Address			
City	State	Zip	City	State	Zφ	
Manager Name	·····		Manayer Namo	Manager Name		
Street Address	• •		Street Address			
Cuy	State	Zip	Cay	State	Zφ	
8. RESIDENT AGEN ingent Name PRENTICE-HALL CON		DO NOT ALTER - C	Changes require filing of Form	n 642 - R.L.G.L. 7-16-1		
Address 170 WESTMINSTER STREET, SUITE 900			PROVIDENCE		02903	

This report must be signed in ink by an authorized person pursuant to R.I.G.L. 7-16-66.

	* 1 0 0 2 1	7 *
File Date	10.3.03	
Check No	175-98	
By	a	
1	IN ARCHITETURY OF CTATE TICE ONLY	

Inder penalty	of perjury, I declare and affirm that I have examined this report.
ncluding any	accompanying schedules and statements, and that all statements,
ontained her	ein are true and correct.
	/]

igniture of Authorized Person Da

Allan Grushkin, Senior Vice President of Pacific Seaboard Investment Company, LLC

Print or Type Name of Authorized Person its

its Member



# STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335

LIMIT	ED LIABILITY COMPANY
Number FLI.C100217	Annual Report for the year2002
The name of the limited liability company is:	
Del Norte Refi, LLC	
The address of the principal office of the lin. 323 Fifth Street, Eureka, CA 9	
The state or other jurisdiction under the law	s of which it is formed is: Alaska
The name and address of its resident agent	S: The Prentice-Hall Corporation System, Inc.
170 Westminster Street, Suite 90	00, Providence, RI 02903
The current mailing address of the limit	ited liability company and the name or title of a person to whom 23 Fifth Street, Eureka, CA 95501 Attn: Sally Stafford
state: Acquisition and collection  If the limited liability company has many company  Name	of promisory notes and real estate agers, the name and address of each manager of the limited liability  Address

Filing Fee: \$50.00

Check No.:

By:

To be filed annually between September 1 and November 1



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

#### er**e De**s

### LIMITED LIABILITY COMPANY

ID	Number FLLC 100217	Annual Report for the year 2001	
1.	The name of the limited liability compa	nny is:	
	DEL NORTE REFI, LLC		
2.	The address of the principal office of the	he limited liability company is:	
	323 FIFTH STREET EUREKA, CA	ALIFORNIA 95501	
3.	The state or other jurisdiction under th	e laws of which it is formed is ALASKA	
4.	The name and address of its resident agent is: PRENTICE-HALL CORP SYSTEM		
	170 WESTMINSTER STREET, SUIT	E 900 PROVIDENCE RI 02903	
5.	The current mailing address of the lim	ited liability company and the name or title of a person to whom communications	
	may be directed are: _323 FIFTH S	TREET EUREKA, CALIFORNIA 95501	
	ATTN: LEGAL DEPT.		
6.	A brief statement of the character of	f the business in which the limited liability company is actually engaged in this	
	state: <u>ACQUISITIONS AND COLL</u>	ECTION OF REAL ESTATE	
7.	If the limited liability company has man	nagers, the name and address of each manager of the limited liability company  Address	
	PACIFIC SEABOARD INVESTMEN	T COMPANY, LLC 323 FIFTH STREET EUREKA, CA. 95501	
		T COMPANY TWO, LLC 323 FIFTH STREET EUREKA, CA. 95501	
Da	ated <u>9/11/01</u>	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and	
		that all statements contained herein are true and correct.  DEL NORTE REFL, LLC  Exact Name of Limited Liability Company	
		BY PACIFIC SEABOARD INVESTMENT COMPANY, LLC MEMBER*	
File	FOR SECRETARY OF STATE USE ONLY be Date:	By Company LLC, 173 SOLE MEMBER, BY SN SERVICING CORP-	
	1574 761	ORATION F/K/A SECURITY NATIONAL SERVICING CORPORATION,	

ITS MANAGER,

Title BY: ALLAN GRUSHKIN, SENIOR VICE PRESIDENT Form No. 632

Revised 01/99



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

### LIMITED LIABILITY COMPANY

### ID Number FLLC 100217

Annual Report for the year 2000

1.	The name of the limited liability compa	nny is:
	DEL NORTE REFI, LLC	
2.	The address of the principal office of t	ha limited liability company is:
	323 FIFTH STREET, EUREKA	, CA 95501
3.	The state or other jurisdiction under the	e laws of which it is formed is ALASKA
4.	The name and address of its resident	agentis: PRENTICE-HALL CORP SYSTEM
	170 WESTMINSTER STREET, SUIT	E 900 PROVIDENCE RI 02903
5.	The current mailing address of the lim	ited liability company and the name or title of a person to whom communications
	may be directed are: 323 FIFTH S	TREET, EUREKA, CA 95501 ATTN: SALLY STAFFORD
7.		nagers, the name and address of each manager of the limited liability company  Address  323 FIFTH STREET, EUREKA, CA 95501
	PACIFIC SEABOARD INVESTMENT COMPANY TWO, LLC	323 FIFTH STREET, EUREKA, CA 95501
Da	1 0 0 2 1 7	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  DEL NORTE REFI, LLC  Exact Name of timited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date: 9/25	By Mar. Miller
Ch	eck No.: 404/8	ROBIN P. ARKLEY II, PRESIDENT Title
Rv	. 2,	Form No. 632 Revised 01/99



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State Corporations Division 100 North Main Street Providence, Rhode Island 02903-1335 Telephone (401) 222-3040

### LIMITED LIABILITY COMPANY

		TED EINDIEN I OOM 7000
ID	Number <u>FL 100217</u>	Annual Report for the year 1999
1.	The name of the limited liability company is:	
	DEL NORTE REFI, LLC	
2.	The address of the principal office of the lim	nited liability company is:
	323 FIFTH STREET, EUREKA, CA 95	501
3.	The state or other jurisdiction under the law	s of which it is formed is ALASKA
4.	The name and address of its resident agent	is: PRENTICE-HALL CORP SYSTEM
	170 WESTMINSTER STREET, SUITE 900	PROVIDENCE, RI 02903
5.	The current mailing address of the limited li	ability company and the name or title of a person to whom communications
	may be directed are: 323 FIFTH STREET	, EUREKA, CA 95501 LENDA M. LEAL, EXEC. V.P.
<ul><li>6.</li><li>7.</li></ul>	state: TO OWN, OPERATE, MANAGE, B	ousiness in which the limited liability company is actually engaged in this  OUY AND SELL REAL ESTATE AND ANY OTHER LAWFUL ACTS  s, the name and address of each manager of the limited liability company  Address
	PACIFIC SEABOARD INVESTMENT COMPANY, LLC	323 FIFTH STREET, EUREKA, CA 95501
	PACIFIC SEABOARD INVESTMENT COMPANY TWO, LLC	323 FIFTH STREET, EUREKA, CA 95501
Da	* 1 0 0 2 1 7 *	Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.  DEL NORTE REFI, LLC  Exact Name of Limited Liability Company
File	FOR SECRETARY OF STATE USE ONLY Date: 10-18-99	By Gellic M. Jell
Che	ck No.: <i>8,547</i>	LENDA M. LEAL Title EXECUTIVE VICE PRESIDENT
By:	AMF	Form No. 632 Revised 01/99