Stat (Domestic Nonprofit, Cred Filing Fee: \$20.00.	ate of California Secretary of State tement of Information it Union and Consumer Cooperativ If this is an amendment, see instr STRUCTIONS BEFORE COMPLETIN	ructions.	
2. CALIFORNIA CORPORATE N			This Space for Filing Use Only
3. STREET ADDRESS OF PRINCIPAL	Iress (Do not abbreviate the name of the c	ity. Item 3 cannot be a P.O. Box. CITY) STATE ZIP CODE
4. MAILING ADDRESS OF THE CORF	PORATION	CITY	STATE ZIP CODE
	ses of the Following Officers (The co		officers. A comparable title for the specific
5. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE ZIP CODE
6. SECRETARY	ADDRESS	CITY	STATE ZIP CODE
7. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE ZIP CODE
Agent for Service of Process If the agent is an individual, the agent must reside in California and Item 9 must be completed with a California street address, a P.O. Box address is not acceptable. If the agent is another corporation, the agent must have on file with the California Secretary of State a certificate pursuant to California Corporations Code section 1505 and Item 9 must be left blank. 8. NAME OF AGENT FOR SERVICE OF PROCESS			
9. STREET ADDRESS OF AGENT FO	R SERVICE OF PROCESS IN CALIFORNIA, IF A	N INDIVIDUAL CITY	STATE ZIP CODE
Davis-Stirling Common Interest Development Act (California Civil Code section 1350, et seq.)			
 10. Check here if the corporation is an association formed to manage a common interest development under the Davis-Stirling Common Interest Development Act. NOTE: Corporations formed to manage a common interest development must also file a Statement by Common Interest Development Association (Form SI-CID) as required by California Civil Code section 1363.6. Please see instructions on the reverse side of this form. 			
11. THE INFORMATION CONTAINED F	HEREIN IS TRUE AND CORRECT.		
DATE TYPE/PRIN SI-100 (REV 01/2013)	T NAME OF PERSON COMPLETING FORM	TITLE	SIGNATURE APPROVED BY SECRETARY OF STATE