

## INSTRUCTIONS FOR COMPLETING FORM SI-200 N/C

For faster processing, the required Statement of Information for most corporations can be filed online at <https://businessfilings.sos.ca.gov/>. Alternatively, statement forms are available on the Secretary of State's website at <http://www.sos.ca.gov/business/> and can be viewed, filled in and printed from your computer. Completed forms along with the applicable fees can be mailed to Secretary of State, Statement of Information Unit, P.O. Box 944230, Sacramento, CA 94244-2300 or delivered in person to the Sacramento office, 1500 11<sup>th</sup> Street, 3<sup>rd</sup> Floor, Sacramento, CA 95814. If you are not completing this form online, please type or legibly print in black or blue ink. This form is filed only in the Sacramento office.

Every **domestic stock and agricultural cooperative corporation** shall file a Statement of Information with the California Secretary of State, within 90 days after filing of its original Articles of Incorporation, and annually thereafter during the applicable filing period. The applicable filing period for a corporation is the calendar month during which its original Articles of Incorporation were filed and the immediately preceding five calendar months. A corporation is required to file this statement even though it may not be actively engaged in business at the time this statement is due. Changes to information contained in a previously filed statement can be made by filing a new form, completed in its entirety.

**LEGAL AUTHORITY:** Statutory filing provisions are found in California Corporations Code section 1502 or Food and Agricultural Code section 54040, unless otherwise indicated. Failure to file this Statement of Information by the due date will result in the assessment of a \$250.00 penalty. (Corporations Code section 2204; Revenue and Taxation Code section 19141.)

**FEES:** The Statement of Information must be accompanied by a **\$20.00** filing fee and **\$5.00** disclosure fee. The filing fee and the disclosure fee may be included in a single check made payable to the Secretary of State. **All domestic stock and agricultural cooperative corporations must pay a total of \$25.00 at the time of filing the statement.** If this statement is being filed to amend any information on a previously filed statement and is being filed outside the applicable filing period, as defined above, **no fee** is required.

**COPIES:** The Secretary of State will endorse file one copy of the statement if an exact copy is submitted along with the statement to be filed. Copies submitted with the statement to be filed can be certified upon request and payment of the \$8.00 per copy certification fee.

**PUBLICLY TRADED CORPORATIONS:** Every publicly traded corporation must also file a Corporate Disclosure Statement (**Form SI-PT**) annually, within 150 days after the end of its fiscal year. A "publicly traded corporation" is a corporation, as defined in Corporations Code section 162, that is an issuer as defined in Section 3 of the Securities Exchange Act of 1934, as amended (15 U.S.C. Sec. 78c), and has at least one class of securities listed or admitted for trading on a national securities exchange, on the National or Small-Cap Markets of the NASDAQ Stock Market, on the OTC-Bulletin Board, or on the electronic service operated by Pink Sheets, LLC. Form SI-PT may be obtained from the Secretary of State's website at <http://www.sos.ca.gov/business/> or by calling the Statement of Information Unit at (916) 657-5448.

### **Complete the Statement of Information (Form SI-200 N/C) as follows:**

- Item 1.** Please do not alter the preprinted name. If the corporate name is not correct, please attach a statement indicating the correct name and the date the name change amendment was filed with the California Secretary of State. If blank, enter the name of the corporation **exactly** as it is of record with the California Secretary of State.
- Item 2.** If there has been no change to the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to Item 16. Note: Effective January 1, 2008, a P.O. Box address is no longer an acceptable address for the agent for service of process. Therefore, if the last address for the agent for service of process is a P.O. Box address, the statement must be completed in its entirety.  
If there has been any change to the last Statement of Information filed with the California Secretary of State, including a change to any address, or no statement has ever been filed, complete this form in its entirety.
- Item 3.** Enter the complete street address, city, state and zip code of the principal executive office. Please do not enter a P.O. Box or abbreviate the name of the city.
- Item 4.** Enter the complete street address, city and zip code of the corporation's principal office in California, if any. Please do not enter a P.O. Box or abbreviate the name of the city. Complete this item only if the address in Item 3 is outside of California.
- Item 5.** Enter the mailing address of the corporation, if different from the street address of the principal executive office.
- Items 6-8.** Enter the name and complete business or residential address of the corporation's chief executive officer (i.e., president), secretary and chief financial officer (i.e., treasurer). Please do not abbreviate the name of the city. The corporation must have these three officers (Corporations Code section 312(a).) Any number of offices may be held by the same person unless the articles or bylaws provide otherwise, except, in the case of an agricultural cooperative, neither the president nor the secretary may be the same person. (Food and Agricultural Code section 54149.) Please note, unless the articles or bylaws provide otherwise, the president, or if there is no president, the chairman of the board, is the chief executive officer of the corporation. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.
- Items 9-11.** Enter the name and complete business or residential address of each incumbent director. If there are more than three directors, please attach additional pages. Please do not abbreviate the name of the city. The corporation must have at least one director. (Corporations Code section 212(a).)
- Item 12.** Enter the number of vacancies on the board of directors, if any.
- Item 13.** Enter the name of the agent for service of process in California. An agent is an individual (director, officer or any other person, whether or not affiliated with the corporation) who resides in California or another corporation designated to accept service of process if the corporation is sued. The agent **must** agree to accept service of process on behalf of the corporation prior to designation.  
If an individual is designated as agent, complete Items 13 and 14. If another corporation is designated as agent, complete Item 13 and proceed to Item 15 (do not complete Item 14).  
Note: Before another corporation may be designated as agent, that corporation must have previously filed with the California Secretary of State, a certificate pursuant to Corporations Code section 1505. **A corporation cannot act as its own agent** and no domestic or foreign corporation may file pursuant to section 1505 unless the corporation is currently authorized to engage in business in California and is in good standing on the records of the California Secretary of State.
- Item 14.** If an individual is designated as agent for service of process, enter a business or residential **street** address in California (a P.O. Box address is not acceptable). Please do not enter "in care of" (c/o) or abbreviate the name of the city. If another corporation is designated as agent, leave Item 14 blank and proceed to Item 15.
- Item 15.** Briefly describe the general type of business that constitutes the principal business activity of the corporation.
- Item 16.** Type or print the name and title of the person completing this form and enter the date this form was completed. By submitting this Statement of Information to the California Secretary of State, the corporation certifies the information contained herein, including any attachments, is true and correct.



**State of California  
Secretary of State**



**STATEMENT OF INFORMATION**

**(Domestic Stock and Agricultural Cooperative Corporations)**

**FEES (Filing and Disclosure): \$25.00. If amendment, see instructions.**

**IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM**

This Space For Filing Use Only

1. **CORPORATE NAME** (Please do not alter if name is preprinted.)

**S**

**DUE DATE:**

**NO CHANGE STATEMENT** (Not applicable if agent address of record is a P.O. Box address. See instructions.)

2.  If there has been no change in any of the information contained in the last Statement of Information filed with the California Secretary of State, check the box and proceed to **Item 16**.

If there have been any changes to the information contained in the last Statement of Information filed with the California Secretary of State, or no statement has been previously filed, this form must be completed in its entirety.

**COMPLETE ADDRESSES FOR THE FOLLOWING** (Do not abbreviate the name of the city. Items 3 and 4 cannot be P.O. Boxes.)

3. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE	CITY	STATE	ZIP CODE
4. STREET ADDRESS OF PRINCIPAL BUSINESS OFFICE IN CALIFORNIA, IF ANY	CITY	STATE	ZIP CODE
		<b>CA</b>	
5. MAILING ADDRESS OF CORPORATION, IF DIFFERENT THAN ITEM 3	CITY	STATE	ZIP CODE

**NAMES AND COMPLETE ADDRESSES OF THE FOLLOWING OFFICERS** (The corporation must have these three officers. A comparable title for the specific officer may be added; however, the preprinted titles on this form must not be altered.)

6. CHIEF EXECUTIVE OFFICER/	ADDRESS	CITY	STATE	ZIP CODE
7. SECRETARY/	ADDRESS	CITY	STATE	ZIP CODE
8. CHIEF FINANCIAL OFFICER/	ADDRESS	CITY	STATE	ZIP CODE

**NAMES AND COMPLETE ADDRESSES OF ALL DIRECTORS, INCLUDING DIRECTORS WHO ARE ALSO OFFICERS** (The corporation must have at least one director. Attach additional pages, if necessary.)

9. NAME	ADDRESS	CITY	STATE	ZIP CODE
10. NAME	ADDRESS	CITY	STATE	ZIP CODE
11. NAME	ADDRESS	CITY	STATE	ZIP CODE

12. NUMBER OF VACANCIES ON THE BOARD OF DIRECTORS, IF ANY:

**AGENT FOR SERVICE OF PROCESS** (If the agent is an individual, the agent must reside in California and Item 14 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 Corporations Code section 1505 and Item 14 must be left blank.)

13. NAME OF AGENT FOR SERVICE OF PROCESS

14. STREET ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL	CITY	STATE	ZIP CODE
		<b>CA</b>	

**TYPE OF BUSINESS**

15. DESCRIBE THE TYPE OF BUSINESS OF THE CORPORATION

16. BY SUBMITTING THIS STATEMENT OF INFORMATION TO THE CALIFORNIA SECRETARY OF STATE, THE CORPORATION CERTIFIES THE INFORMATION CONTAINED HEREIN, INCLUDING ANY ATTACHMENTS, IS TRUE AND CORRECT.

DATE \_\_\_\_\_ TYPE/PRINT NAME OF PERSON COMPLETING FORM \_\_\_\_\_ TITLE \_\_\_\_\_ SIGNATURE \_\_\_\_\_