

# Secretary of State Business Programs Division

Business Entities 1500 11th Street, Sacramento, CA 95814 P.O. Box 944260, Sacramento, CA 94244-2600

### **Business Entities Submission Cover Sheet**

For fastest service, file online at bizfileOnline.sos.ca.gov.

#### Instructions:

- Complete and include this form with your paper submission. This form will not be made part of the filed document.
- Make all checks or money orders payable to the Secretary of State.
- In-person submissions (excluding Statements of Information): \$15 special handling fee. Do not include a \$15 special handling fee when submitting documents by mail.
- All submissions are reviewed in the date order of receipt, with online submissions given priority.
   For updated processing time information, visit www.sos.ca.gov/business/be/processing-dates.
- To obtain a certified copy, include certification fees with your submission.

Note: All correspondence related to your submission will be sent to the name and address on your check or money order.

## Contact Person (Please type or print legibly):

First Name:	Last Name:
Phone Number:	Email:
Entity Information (Please type or print l	egibly):
Entity Name:	
Entity Number (if applicable):	
Comments:	



# Secretary of State Statement of Information and Statement by Common Interest Development (CID) Association (California Nonprofit CID)

NP/CID

This form is due within 90 days of initial registration and every two years thereafter.

This is a combined form, with a total fee of \$35.00.

- The Statement of Information (\$20.00 Filing Fee); and
- The Statement by Common Interest Development (\$15.00 Filing Fee).

Certified Copy Fee (Optional) - \$5.00

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

This Space For Office Use Only

2. Secretary of State Entity Number

#### 3. Business Addresses

a. Street Address of California Principal Office, if any - Do not enter a P.O. Box	City (no abbreviations)	State	Zip Code
		CA	
b. Mailing Address of Corporation, if different than item 3a	City (no abbreviations)	State	Zip Code

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 Office	cer/ First Name	Middle Name	Last Name	Suffix
Address			City (no abbreviations) State Zi	ip Code
b. Secretary/	First Name	Middle Name	Last Name	Suffix
Address			City (no abbreviations) State Zi	ip Code
c. Chief Financial Offic	er/ First Name	Middle Name	Last Name	Suffix
Address			City (no abbreviations) State Zi	ip Code

address.							
a. California Agent's First Name (if agen corporation)	t is <b>not</b> a	Middle Name		Last Name			Suffix
o. Street Address (if agent is <b>not</b> a corporation) - <b>Do</b>		City (no abbreviations) State Z			Zip Co	l de	
					CA	<b>\</b>	
CORPORATION – Complete Item 5c	only. Only inclu	ıde the nar	me of th	ne registered a	gent C	orporati	on.
c. California Registered Corporate Agen	t's Name (if ager	nt is a corp	oration)	) – Do not com	plete l	tem 5a d	or 5b
Statement by Co		-			der the	Davis-S	Stirling
Common Interest Development Act (Cali Industrial Common Interest Developmen	fornia Civil Code	section 40	000, et s	seq.) or under	the Co		
6. The Association is formed to mana (select only one):	age a common i	nterest de	velopn	nent under the	e follo	wing lav	N
Davis-Stirling Common Interest Dev	velopment Act. (C	Complete re	emainin	g items: 6-13)			
Commercial and Industrial Common	Interest Develop	oment Act.	(Comp	lete remaining	items:	6-8 and	10-13)
7. Street Address of the Business or	Corporate Offic	e of the A	ssocia	tion, if any			
Street Address – Do not list a P.O. Box	City (no abbrev	eviations) State Zip Code		Telephone Numbe		umber	
8. Street Address of Association's Or corporate office or, if no onsite office, Agent of the Association.)							
Street Address – Do not list a P.O. Box		City (no a	abbrevi	ations)	State	Zip Co	de
If the address listed above is that of the F Officer of the Association, check the follo	•	e Telephone Number or Email Address					
9. President of the Association - Davidaytime telephone number or email at the address and telephone number of Commercial and Industrial Association	address. The add of the Association	lress and t o's Onsite (	elephor Office o	ne number <b>mu</b> r Managing Ag	st be o	different	from
Name		Telephor	ne Num	ber or Email A	ddress	3	
Address		City (no a	abbrevia	ations)	State	Zip Coo	de
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INDIVIDUAL - Complete Items 5a and 5b only. Must include agent's full name and California street

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

10. Association's Managing Agent, if any (Name, stre Davis-Stirling Corporations, the address and telepho and telephone number of the President of the Association	ne number <b>must</b>					
Name	Telephone Number					
Street Address – Do not list a P.O. Box	City (no abbrevi	State	Zip Code			
11. Physical Location of the Common Interest Devel	opment					
Front Street	Near Cross Street					
City (if in an unincorporated area, enter the city closest in proximity.)	County or Counties					
12. Type of Common Interest Development Managed by the Association - Check the applicable box: (At least one of the types listed below must be checked. If Davis-Stirling Common Interest Development, refer to California Civil Code section 4100 for definitions. If Commercial and Industrial Common Interest Development, refer to California Civil Code section 6534 for definitions.)						
Community Apartment Project (Note: A commercial Apartment Project.)	l and Industrial Dev	elopment <b>canno</b>	ot be a	Community		
Condominium Project						
Planned Development						
Stock Cooperative						
13. Separate Interests (Note: Must have at least one Se leave blank.)	parate Interest. D	o not enter zer	or no	ne, and do not		
Number of Separate Interests in the Development						
14. Email Notifications						
Provide an email address to opt-in to receive entity related notifications, including Statement of Information reminders, by email rather than USPS mail. Note: If no email address is provided, you will continue to receive notices and reminders by USPS mail.						
Yes, I opt-in to receive entity notifications via email: Email Address:						
To change your option after filing, you must submit a new complete Statement of Information and Statement by Common Interest Development Association.						
The information contained herein, including in any attachments, is true and correct.						
Date Type or Print Name	Title		Signatu	ıre		
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