

CORPORATE OFFICER DESIGNATION

Business Name: _____ **License No.** _____

There has been no change in our officer designation

IF YES, FILL OUT INFORMATION BELOW FOR ALL NEW OFFICERS.

RESPONSIBLE PARTIES

Check One	FULL NAME FIRST & LAST NAME	TITLE	HOME ADDRESS (No PO Boxes) PHYSICAL ADDRESS, CITY, STATE, ZIP	DATE OF BIRTH	SOCIAL SECURITY NO.	DRIVERS LICENSE NO.
Add <input type="checkbox"/> Delete <input type="checkbox"/>						
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There has been no change in the percentage of significant financial interest (10% or greater)

INDIVIDUALS, PARTNERS, MEMBERS, CHIEF EXECUTIVE OFFICERS/PRESIDENTS OR CHIEF FINANCIAL OFFICERS/TREASURERS AND ALL INDIVIDUALS AND/OR ENTITIES WHICH HOLD A SIGNIFICANT FINANCIAL INTEREST (10% OR GREATER) MUST COMPLETE THE FOLLOWING: (if a partner or member is a Partnership, LLC or Corporation, identify and provide the following information for all individuals of each entity which hold a significant financial interest (10% or greater) and include a current organizational chart.)

FINANCIAL INTEREST

FULL NAME FIRST & LAST NAME	TITLE	%	HOME ADDRESS (No PO Boxes) PHYSICAL ADDRESS, CITY, STATE, ZIP	DATE OF BIRTH	SOCIAL SECURITY NO.	DRIVERS LICENSE NO.

Pursuant to the provisions of Chapter 6 and/or 7, Division 20 of the Food and Agricultural Code, State of California, each applicant must provide the above information to obtain license(s) to conduct business in farm products. Each individual has the right to review files maintained on them by Market Enforcement.

Signature _____ Date _____ Print or Type Name _____

 Title (Owner, Partner, Member or Corporate Officer)