

Committee for Political Action (PAC) Registration Form

FILED

AUG 28 2000

State of Nevada

Dean Heller
Secretary of State

Print or type the following information; complete both sides of this registration form:

REGISTRATION: (check one) New registration Amended registration (if amended list reason)

REASON FOR AMENDMENT: Change in officers Change resident agent

Other CHANGE OF ADDRESS

NAME OF COMMITTEE: OSCAR B. GOODMAN POLITICAL ACTION COMMITTEE

Mailing Address: 6100 ELTON AVE. SUITE 1000

| | | | |
|------------------|-----------|--------------|---------------------|
| <u>LAS VEGAS</u> | <u>NV</u> | <u>89107</u> | <u>702-384-1120</u> |
| City | State | Zip | Telephone |

PURPOSE: (Briefly state the purpose for which the political action committee was organized.)

LEGISLATIVE ACTIVISM IN SUPPORT OF THE REVITALIZATION OF DOWNTOWN LAS VEGAS, AND FOR THE SUPPORT OF POPULIST ISSUES

RESIDENT AGENT: (Pursuant to NRS 294A.260, each committee for political action must appoint and keep in this state a resident agent who must be a natural person who resides in the State of Nevada.)

Name of Resident Agent: MICHAEL W. KERN

Mailing Address: 6100 ELTON AVE. SUITE 1000

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|-------------------|---------------|--------------|---------------------|
| <u>LAS VEGAS,</u> | <u>NEVADA</u> | <u>89107</u> | <u>702-384-1120</u> |
| City | State | Zip | Telephone |

ACCEPTANCE OF APPOINTMENT BY RESIDENT AGENT

I, MICHAEL W. KERN, hereby accept appointment as Resident Agent for the above named committee for political action.

Michael W. Kern
Signature of Resident Agent

8-28-2000
Date

FILED
IN THE OFFICE OF THE
SECRETARY OF STATE OF THE
STATE OF NEVADA

AUG 28 2000

OFFICERS:

(Please list the name, title and address of each officer.)

OSCAR B. GOODMAN
Name
PRESIDENT
Title

520 S. 4TH ST.
Address
LAS VEGAS, NEVADA 89101
City/State/Zip

MICHAEL W. KERN
Name
SECRETARY
Title

6100 ELTON AVE., SUITE 1000
Address
LAS VEGAS, NEVADA 89107
City/State/Zip

MICHAEL W. KERN
Name
TREASURER
Title

6100 ELTON AVE., SUITE 1000
Address
LAS VEGAS, NEVADA 89107
City/State/Zip

Name
Title

Address
City/State/Zip

Name
Title

Address
City/State/Zip

AFFILIATION: (If the committee for political action is affiliated with any other organizations, list the name and address of each organization.)

Name of Organization:

Address:

N/A

Submitted By:

MICHAEL W. KERN
Name of representative of group



8-28-2000
Date

Send Completed Form to:
SECRETARY OF STATE
101 NORTH CARSON STREET #3
CARSON CITY, NEVADA 89701-4786

PHONE: (775) 684-5705 FAX: (775) 684-5718