

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mathias
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **822797** (7)

1. Corporation Name
COUNTRYWIDE FUNDING CORPORATION



Principal Place of Business: **155 NORTH LAKE AVE DEPT. 019 P.O. BOX 7137 PASADENA CA 91109-4137**
Mailing Address: **155 NORTH LAKE AVE DEPT. 019 P.O. BOX 7137 PASADENA CA 91109-4137**

2. Principal Place of Business: 21 Sub. Apt. #, etc. 22 City & State 23 Zip Country 24
2a. Mailing Address: 26 Sub. Apt. #, etc. 27 City & State 28 Zip Country 29 30

3. Date Incorporated or Qualified: **05/15/1969**
3a. Date of Last Report: **03/31/1995**
4. FEI Number: **13-2631719**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE 105
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.002 and 607.1604, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.002, Florida Statutes.

SIGNATURE: _____ DATE: _____
Officer or Director of the Corporation: _____ Date Registered Agent Takes Office: _____

12. OFFICERS AND DIRECTORS

NAME	ADDRESS	TYPE
SAMUELS, SANDOR E	155 NORTH LAKE AVENUE PASADENA CA	<input type="checkbox"/> DELETED
KURLAND, STANFORD L.	155 NORTH LAKE AVENUE PASADENA CA	<input type="checkbox"/> DELETED
MOZILO, ANGELO	155 NORTH LAKE AVENUE PASADENA CA	<input type="checkbox"/> DELETED
LOEB, DAVID	155 NORTH LAKE AVENUE PASADENA CA	<input type="checkbox"/> DELETED
POE, PATRICIA I.	155 N. LAKE AVE. PASADENA CA	<input type="checkbox"/> DELETED

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

NAME	ADDRESS	TYPE
13 NAME	13 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14 CITY, ST, ZIP	21 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	23 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
24 CITY, ST, ZIP	31 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	33 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
34 CITY, ST, ZIP	41 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	43 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
44 CITY, ST, ZIP	51 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	53 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
54 CITY, ST, ZIP	61 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	63 STREET ADDRESS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
64 CITY, ST, ZIP		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report, or successor annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation, or the relative or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Exhibits 12 or 13 if changed or on an attached worksheet.

SIGNATURE: *Patricia I. Poe* Patricia I. Poe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/18/96 (818) 666-5769
DATE TIME

CR2E034 (12/95)