

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000436

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: PEOPLE'S CHOICE HOME LOAN, INC.

**Current Principal Place of Business:**

7515 IRVINE CENTER DR.  
IRVINE, CA 92618

**New Principal Place of Business:**

**Current Mailing Address:**

7515 IRVINE CENTER DR.  
IRVINE, CA 92618

**New Mailing Address:**

FEI Number: 94-3348277

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KORNSWIET, NEIL B  
Address: 7515 IRVINE CENTER DR.  
City-St-Zip: IRVINE, CA 92618

Title: S ( ) Delete  
Name: GUBMAN, IRWIN  
Address: 7515 IRVINE CENTER DRIVE  
City-St-Zip: IRVINE, CA 92618

Title: T ( ) Delete  
Name: PLANTIKO, BRAD S  
Address: 7515 IRVINE CENTER DR.  
City-St-Zip: IRVINE, CA 92618

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERYL D. AZLIN

CM

01/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date