

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 22, 2002 8:00 am**  
**Secretary of State**

UBR1519 AI

04-22-2002 90122 028 \*\*\*150.00

**DOCUMENT # F01000000249**  
 1. Entity Name  
**COUNTRYWIDE INVESTMENT SERVICES, INC.**

Principal Place of Business      Mailing Address  
**1515 WALNUT GROVE AVE.. ROOM 77**      **4500 PARK GRANADA. CH-11**  
**ROSEMEAD CA 91770-3710**      **CALABASAS CA 91302**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**26745 Malibnu Hills Rd.**  
**MH-11**  
 City & State      City & State  
**Calabasas Hills, CA**  
 Zip      Country      Zip      Country  
**91301**

4. FEI Number      Applied For  
**NOT APPLICABLE**      Not Applicable  
 5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY**  
**1201 HAYS STREET**  
**TALLAHASSEE FL 32301-2525**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City      **FL**      Zip Code

8. 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.   
**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**  
 10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD</b> <b>PIPES</b> <b>1515 WALNUT GROVE AVE., ROOM 77</b> <b>ROSEMEAD CA 91770-3710</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>CCO</b> <b>BERTA, ROBERT W JR.</b> <b>994 FLOWER GLEN ROAD SV-77A</b> <b>SIMI VALLEY CA 91770-3710</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AT</b> <b>KURLAND, STANFORD L</b> <b>4500 PARK GRANADA CH-3</b> <b>CALABASAS CA 91302</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>BOW, SUSAN E</b> <b>4500 PARK GRANADA CH-3</b> <b>CALABASAS CA 91302</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>BOONE, THOMAS H</b> <b>4500 PARK GRANADA CH-3</b> <b>CALABASAS CA 91302</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>AS</b> <b>DANIEL, LINDA J</b> <b>4500 PARK GRANADA CH-3</b> <b>CALABASAS CA 91302</b>	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>President/CEO</b> <b>Rosalva Garcia</b> <b>1515 Walnut Grove Avenue</b> <b>Rosemead, CA 91770</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Vice President/CCO</b> <b>Robert W. Berta Jr.</b> <b>1515 Walnut Grove Avenue</b> <b>Rosemead, CA 91770</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director</b> <b>Steven D. Phillips</b> <b>450 America Street</b> <b>Simi Valley, CA 93065</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary</b> <b>Susan E. Bow</b> <b>4500 Park Granada</b> <b>Calabasas, CA 91302</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Assistant Secretary</b> <b>Glenda J. Daniel</b> <b>4500 Park Granada</b> <b>Calabasas, CA 91302</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Glenda J. Daniel**      Date: **4/11/02**      Daytime Phone # \_\_\_\_\_

CR2E034 (9/01)

ATTACH # FO10000000249/  
636073

**COUNTRYWIDE INVESTMENT SERVICES, INC.**  
*List of Officers and Directors*

**Directors**

Thomas H. Boone	Director	4500 Park Granada Calabasas, CA 91302
Steven D. Phillips	Director	450 American Street Simi Valley, CA 93065
Rosalva Garcia	Director	1515 Walnut Grove Avenue Rosemead, CA 91770

**Officers**

Rosalva Garcia	President/CEO	1515 Walnut Grove Avenue Rosemead, CA 91770
Robert W. Berta Jr.	Vice President/CCO	1515 Walnut Grove Avenue Rosemead, CA 91770
Steven Hively	Treasurer & CFO	4500 Park Granada Calabasas, CA 91302
Shawn L. Hofland	Assistant Vice President	1515 Walnut Grove Avenue Rosemead, CA 91770
Susan E. Bow	Secretary	4500 Park Granada Calabasas, CA 91302
Glenda J. Daniel	Asst. Secretary	4500 Park Granada Calabasas, CA 91302