## F9400001813

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ACCOUNT NO. : 07210000032		
REFERENCE : 360225 129801A		
AUTHORIZATION Spellele man		
COST LIMIT : \$35.00		
ORDER DATE : December 13, 2007		
ORDER TIME : 10:01 AM		
ORDER NO. : 360225-225		
CUSTOMER NO: 129801A		
CHANGE OF AGENT		
NAME: HEADLANDS MORTGAGE COMPANY		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
XX PLAIN STAMPED COPY		
CONTACT PERSON: Cindy Harris		
EXAMINER'S INITIALS:		

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of California er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: HEADLANDS MORTGAGE COMPANY
	office address:ollow Drive, Novato, CA 94945
3. The mailing a	address (if different):
4. Date of incor	poration/qualification: 04/08/1994 Document number: F94000001813
	d street address of the current registered agent and registered office on file with the rtment of State:
	CT Corporation System
	1200 South Pine Island Road
	Plantation, FL 33324
6. The name and (if changed):	Corporation Service Company  1201 Hays Street  (P.O. Box NOT acceptable)  Tallahassee, FL 32301
	Corporation Service Company
	1201 Hays Street
	(P.O. Box NOT acceptable)
	Tallahassee, FL 32301
The street addr as changed will	ess of its registered office and the street address of the business office of its registered agent, l be identical.
Such change w authorized by t	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.
	ure of an officer or director)    Items D. Gilbert SVP
I further agrée of my duties, an document is be corporation ha	t the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change. In Service Company
By: Me	hollo R. Downs 12-17-07 (Date)
If signing on be	ehalf of an entity:
Michelle R. Var	nnoy, Assistant VP
(	Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*