

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000001813

FILED
Apr 25, 2008
Secretary of State

Entity Name: HEADLANDS MORTGAGE COMPANY

Current Principal Place of Business:

100 WOOD HOLLOW DRIVE
NOVATO, CA 94945 US

New Principal Place of Business:

Current Mailing Address:

100 WOOD HOLLOW DRIVE
NOVATO, CA 94945 US

New Mailing Address:

FEI Number: 94-2851992 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: ECFO () Delete
Name: PETRINI, DAVID
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

Title: EVSD () Delete
Name: GILBERT, IRENE D
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

Title: EVD () Delete
Name: POISSON, BECKY
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

Title: AS () Delete
Name: JOHNSON, BETTY ASST. S
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

Title: PD (X) Delete
Name: ABREU, STEVEN
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: ABREU, STEVEN
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

Title: SVP (X) Change () Addition
Name: GILBERT, IRENE D
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

Title: SEC (X) Change () Addition
Name: GILBERT, IRENE
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

Title: CFO (X) Change () Addition
Name: RUH, COLIN
Address: 100 WOOD HOLLOW DRIVE
City-St-Zip: NOVATO, CA 94945

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

I hereby certify that the information supplied with this filing does not qualify 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: IRENE GILBERT

SEC

04/25/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date