

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000003300

FILED
Mar 17, 2016
Secretary of State
CC4581618229

Entity Name: INTERNATIONAL CITY MORTGAGE, INC.

Current Principal Place of Business:

333 S ANITA DRIVE
SUITE 300
ORANGE, CA 92868

Current Mailing Address:

333 S ANITA DRIVE
SUITE 300
ORANGE, CA 92868

FEI Number: 33-0231744

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PARACORP INCORPORATED
155 OFFICE PLAZA DRIVE
1ST FLOOR
TALLAHASSEE, FL 32301 US

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: FARRELL L. FACEY

03/17/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name HANKLA, JAMES K
Address 9480 GATEWAY DR, STE 201
City-State-Zip: RENO NV 89521

Title V, SECRETARY
Name FACEY, FARRELL L
Address 333 S ANITA DRIVE #300
City-State-Zip: ORANGE CA 92868

Title TREASURER
Name DICKEY, MATTHEW W
Address 333 S ANITA DRIVE
SUITE 300
City-State-Zip: ORANGE CA 92868

Title CHIEF OPERATIONS OFFICER
Name ZIKA, GABRIELLE
Address 333 S ANITA DRIVE
SUITE 300
City-State-Zip: ORANGE CA 92868

Title DIRECTOR
Name COMISKY, CHARLES
Address 250 VESEY ST, 23RD FL
City-State-Zip: NEW YORK NY 10281

Title DIRECTOR
Name ALLEN, HOWARD LEE
Address 333 S ANITA DRIVE
SUITE 300
City-State-Zip: ORANGE CA 92868

Title DIRECTOR
Name HANKLA, JAMES C
Address 6028 AVENIDA DE CASTILLO
City-State-Zip: LONG BEACH CA 90803

Title DIRECTOR
Name DANILOWICZ, MATTHEW
Address 2701 N ONTARIO ST
City-State-Zip: BURBANK CA 91504

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I hereby 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 all other like empowered.

SIGNATURE: FARRELL L. FACEY

EVP

03/17/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CHRISMAN, ROBERT JR.
Address 97 SOUTHERN HEIGHTS
City-State-Zip: SAN RAFAEL CA 94901

Title DIRECTOR
Name MALONE, ROBERT
Address 102 E MAIN ST
City-State-Zip: SONORA TX 76950