

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000004030

**FILED**  
**Jan 10, 2017**  
**Secretary of State**  
**CC6864058450**

**Entity Name:** CENTER STREET LENDING CORPORATION

**Current Principal Place of Business:**

18301 VON KARMAN, STE 330  
IRVINE, CA 92612

**Current Mailing Address:**

18301 VON KARMAN, STE 330  
IRVINE, CA 92612

**FEI Number:** 27-1897100

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name COUIG, STEPHEN  
Address 18301 VON KARMAN, STE 330  
City-State-Zip: IRVINE CA 92612

Title D  
Name FROSH, DAVID  
Address 18301 VON KARMAN, STE 330  
City-State-Zip: IRVINE CA 92612

Title CFO  
Name EID, BRIAN  
Address 18301 VON KARMAN, STE 330  
City-State-Zip: IRVINE CA 92612

Title VP  
Name LINCHANGCO, LYNN  
Address 18301 VON KARMAN, STE 330  
City-State-Zip: IRVINE CA 92612

Title SECRETARY  
Name WILKINSON, DAG  
Address 18301 VON KARMAN, STE 330  
City-State-Zip: IRVINE CA 92612

*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:** CENTER STREET LENDING CORPORATION, BY  
LYNN LINCHANGCO, VP OPERATIONS

VP OPERATIONS

01/10/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date