1. Entity Nan	MENT # 818027 ORTGAGE CORP.				I	Apr 05, 20 Secretary 04-05-2000 9008		
Principal Place of Business		Mailing Address						
6320 CANOGA AVE 13 FL WOODLAND HILLS CA 91367		6320 CANOGA AVENUE 13TH FLOOR - TR-28 WOODLAND HILLS CA 91367-2526				~~~~;	o (J	
		US				! Po tálo) diban (alto abtila dibil)	ANDRO BORN BOARD BORN BA	lit Otoli Loot
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN	THIS SPACE	
City & State		City & State			4. FEI Nur	95-2021917	⊢ —	oplied For at Applicable
Zip	Country	Zip	Country		5. Certifica	nte of Status Desired [\$8.75 Add	
	6. Name and Address of Current Re	egistered Agent	Name		7. Name a	nd Address of New Regis	tered Agent	
PRENTICE-HALL CORPORATION SYSTEM, INC.			Name			, ,		
	NORTH MAGNOLIA STREET	w, INC.	Street A	Address (P	O. Box Nun	ber is Not Acceptable)		
TALL	AHASSEE FL 32301			<u></u>				
			City			1	FL Zip Cod	e
8. The above	named entity submits this statement for t	he purpose of changing its r	registered office o	r registere	d agent, or l	ooth, in the State of Florida.		
SIGNATURE .	N/A Signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible		Registered Agent signa				DATE	
Tax filing requirement and elects to do so. (See criteria on back)		After MAY 1, 200 Make Check Payabl	00 Fee will be \$	550.00)	Election Campaign Financir Trust Fund Contribution.	· _	0 May Be d to Fees
11.	OFFICERS AND DI		12.			S/CHANGES TO OFFICER	S AND DIRECTOR	S IN 11
TITLE NAME	PD MCAFEE, SCOTT	Delete	TITLE	DEVI		David B.	☐ Change	XX Addition
STREET ADDRESS	6320 CANOGA AVE		STREET ADDRESS		Canog			
CITY-ST-ZIP	WOODLAND HILLS CA 91367		CITY-ST-ZIP	Wood	lland H	ills, CA 91367		
TITLE	DEVP	Delete De	TITLE	SVPS			☐ Change	XX Addition
NAME Street address	WRIGHT, STEPHEN 6320 CCANOGA AVE.		NAME STREET ADDRESS		nael L.			
CITY-ST-ZIP	WOODLAND HILLS CA 91367		CITY-ST-ZIP		Canog	a Ave. 111s, CA 91367		
TITLE	VCFO	☑ Delete	TITLE	AS		1	☐ Change	X Addition
NAME	GEUTHER, CARL		NAME		et Dean	1		
STREET ADDRESS. CITY-ST-ZIP	-6320 CANOGA AVE WOODLAND HILLS CA 91367	transcription of the second	STREET ADDRESS CITY-ST-ZIP		Canog			
TITLE	AS	☐ Delete	TITLE	Wood EVP	lland H	ills, CA 91367	☐ Change	XX Addition
NAME	MALLEK, ELLEN C	- Delicie	NAME		. Walte	ŗ	C. Gridings	4 <u>-3</u> -4000000
STREET ADDRESS	6320 CANOGA AVENUE		STREET ADDRESS	6320	Canog	a Ave.		
CITY-ST-ZIP	WOODLAND HILLS CA		CITY-ST-ZIP	WOOG	H	ills, CA 91367		
TITLE NAME	SEVP VOGEL, JULES	☐ Delete	TITLE NAME	Ì			Change	Addition
STREET ADDRESS	6320 CANOGA AVE		STREET ADDRESS					
CITY-ST-ZIP	WOODLAND HILLS CA 91367		CITY-ST-ZIP	-		1		
TITLE NAME		☐ Delete	TITLE NAME			1	☐ Change	☐ Addition
STREET ADDRESS	•		STREET ADDRESS					
CITY-ST-ZIP	·		CITY-ST-ZIP			1		
13. I hereby of indicated	ertify that the information supplied with the	is filling does not qualify for the	the exemption sta	ted in Sec	tion 119.07(3)(i), Florida Statutes. I furth	ner certify that the in	ntormation

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2000 UNIFORM BUSINESS REPORT (UBR)

3/24/00

(818) 592-4112

Date Daytime Phone #