

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 834565

FILED
Apr 10, 2002 8:00 AM
Secretary of State

Entity Name: CMG MORTGAGE INSURANCE COMPANY

Current Principal Place of Business:

% BARBARA A MONSON
5910 MINERAL POINT RD
MDISON, WI 53705 US

Current Mailing Address:

% BARBARA A MONSON
5910 MINERAL PT RD
MADISON, WI 53705 US

New Principal Place of Business:

% LAURIE CARLSON 3B-2
5910 MINERAL POINT RD
MDISON, WI 53705 US

New Mailing Address:

% LAURIE CARLSON 3B-2
5910 MINERAL PT RD
MADISON, WI 53705 US

FEI Number: 36-3105660

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INSURANCE COMMISSIONER
CAPITOL BLDG
TALLAHASSEE, FL 32304 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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KITCHEN, MICHAEL B.
Address: 5910 MINERAL POINT ROAD
City-St-Zip: MADISON, WI

Title: S () Delete
Name: WILSON, PHYLLIS A.
Address: 601 MONTGOMER STREET
City-St-Zip: SAN FRANCISCO, CA

Title: SVGD () Delete
Name: MCCOURT, JAMES R.
Address: 135 MAIN STREET, STE. 1040
City-St-Zip: SAN FRANCISCO, CA

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: S (X) Change () Addition
Name: PATZNER, FAYE A
Address: 5910 MINERAL POINT ROAD
City-St-Zip: MADISON, WI 53705 US

Title: SVPD (X) Change () Addition
Name: MCCOURT, JAMES R.
Address: 5910 MINERAL POINT ROAD
City-St-Zip: MADISON, WI 53705 US

Title: T D () Change (X) Addition
Name: LORENZEN, JOHN M JR
Address: 5910 MINERAL POINT ROAD
City-St-Zip: MADISON, WI 53705 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: FAYE A. PATZNER

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04/10/2002

Electronic Signature of Signing Officer or Director

Date