

**2006 LIMITED PARTNERSHIP ANNUAL REPORT**  
**Due By May 1, 2006**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 MAR 17 AM 10:46

DOCUMENT # B00000000204

1. Entity Name  
COUNTRYWIDE HOME LOANS SERVICING, L.P.



Principal Place of Business  
4500 PARK GRANADA CH-11  
CALABASAS, CA 91302

Mailing Address  
8521 FALLBROOK AVENUE  
WH-11  
WEST HILLS, CA 91304

**DO NOT WRITE IN THIS SPACE**

01092006 No Chg-LP

CR2E003 (11/05)

4. FEI Number  
95-4797107

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

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

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$500.00**  
**After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.**  
**NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

**12. GENERAL PARTNER INFORMATION**

DOCUMENT # F00000003679  
NAME COUNTRYWIDE GP, INC.  
STREET ADDRESS 4500 PARK GRANADA CH-11  
CITY-ST-ZIP CALABASAS, CA 91302

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CITY-ST-ZIP

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700069159807  
03/31/06--01027--004 \*\*500.00

**DO NOT WRITE  
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: Teresa C. Palma

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER  
**Assistant Secretary**

3/7/06  
Date

(818) 316-8432  
Daytime Phone #

STAPLE CHECK HERE