FILED

Mar 28, 2002 8:00 am

2002 Uniform Business Report (UBR)

DOCUMENT # F01000004738 **Secretary of State** 1. Entity Name 03-28-2002 90041 001 ***150.00 AMERICAN MORTGAGE EXPRESS FINANCIAL CORP. Principal Place of Business Mailing Address 3570 CAMINO DEL RIO NORTH 3570 CAMINO DEL RIO NORTH SHITE 300 SUITE 300 SAN DIEGO CA 92108 SAN DIEGO CA 92108 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 Number Applied For 93-0972190 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DEXTER, GREGORY Street Address (P.O. Box Number is Not Acceptable) 825 S OSPREY AVE #208 SARASOTA FL 34236 Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. CR2E034 (9/01) TITLE CP ☐ Delete TITLE Change ☐ Addition NAME DUNHAM, JUDITH A NAME STREET ADDRESS 3570 CAMINO DEL RIO NORTH SUITE 300 STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP SAN DIEGO CA 92108 Addition TITLE ☐ Delete TITLE ☐ Change VS NAME NAME DUNHAM, LINDA K STREET ADDRESS STREET ADDRESS 3570 CAMINO DEL RIO NORTH SUITE 300 CITY-ST-7IP CITY-ST-7IP SAN DIEGO CA 92108 Change TITLE. TITLE Addition Delete_ NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplied in the information indicated on this report or supplied in the information 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

ESURED (Judith A. Dunham) SIGNATURE: ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

March 14,2002 (619)521-3000

Daytime Phone #