

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F02000005768

FILED  
Apr 04, 2005  
Secretary of State

Entity Name: AMERIQUEST MORTGAGE INSURANCE SERVICES CORPORATION

## Current Principal Place of Business:

505 CITY PARKWAY  
ORANGE, CA 92868

## New Principal Place of Business:

## Current Mailing Address:

1100 TOWN & COUNTRY ROAD, SUITE 450  
ORANGE, CA 92868

## New Mailing Address:

FEI Number: 95-3918076

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE  
SUITE 4  
WESTON, FL 33331 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: EDDY SALDANA

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: PDT ( ) Delete  
Name: GRAZER, JOHN P  
Address: 1100 TOWN & COUNTRY ROAD, SUITE 1100  
City-St-Zip: ORANGE, CA 92868

Title: V ( ) Delete  
Name: ORTA, YVONNE  
Address: 505 CITY PARKWAY  
City-St-Zip: ORANGE, CA 92868

Title: S ( ) Delete  
Name: BASS, ADAM J  
Address: 1100 TOWN & COUNTRY ROAD, SUITE 1100  
City-St-Zip: ORANGE, CA 92868

Title: AS ( ) Delete  
Name: DILLINGHAM, DEL  
Address: 1100 TOWN & COUNTRY RD #450  
City-St-Zip: ORANGE, CA 92868

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: JOHNSON, JANE  
Address: 505 CITY PARKWAY WEST, 3RD FLOOR  
City-St-Zip: ORANGE, CA 92868

Title: AV (X) Change ( ) Addition  
Name: ORTA, YVONNE  
Address: 505 CITY PARKWAY WEST, 3RD FLOOR  
City-St-Zip: ORANGE, CA 92868

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

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

Title: TCFO ( ) Change (X) Addition  
Name: CHRISTENSEN, KAREN  
Address: 1100 TOWN & COUNTRY RD SUITE 1100  
City-St-Zip: ORANGE, CA 92868

Title: AS ( ) Change (X) Addition  
Name: TIBEREND, DIANE E  
Address: 1100 TOWN & COUNTRY RD SUITE 1100  
City-St-Zip: ORANGE, CA 92868

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: DIANE E. TIBEREND

AS

04/04/2005

Electronic Signature of Signing Officer or Director

Date