2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F0400000031

Entity Name: SHEARSON HOME LOANS, INC.

FILED Aug 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6330 S. SANDHILL STE. 8 2470 SAINT ROSE PKWY. LAS VEGAS, NV 89120

SUITE 315

HENDERSON, NV 89074

Current Mailing Address: New Mailing Address:

2470 SAINT ROSE PKWY. 6330 S. SANDHILL STE. 8 LAS VEGAS, NV 89120 SUITE 315

HENDERSON, NV 89074

FEI Number: 55-0849796 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC PARACORP INCORPRATED 2731 EXECUTIVE PARK DRIVE 236 EAST 6TH AVENUE US SUITE 4

TALLAHASSEE, FL 32303 WESTON, FL 33331 US

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: NINH HO ASST. SECRETARY 08/23/2007

> 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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BAILEY, WAYNE Name: Name: BARRON, MICHAEL A

6330 S. SANDHILL STE. 8 2470 ST. ROSE PARKWAY SUITE 315 Address: Address:

City-St-Zip: LAS VEGAS, NV 89120 City-St-Zip: HENDERSON, NV 89074

VCVP Title: **EVP** Title: () Delete (X) Change () Addition

Name: GRADY, PAUL Name: SHOREY, LEE W

6330 S. SANDHILL STE. 8 2470 ST. ROSE PARKWAY SUITE 315 Address: Address:

LAS VEGAS, NV 89120 HENDERSON, NV 89074 City-St-Zip: City-St-Zip:

Title: Title: DS () Delete SECR (X) Change () Addition SHOREY, LEE SHOREY, LEE Name: Name:

6330 S. SANDHILL STE. 8 2470 ST. ROSE PARKWAY SUITE 315 Address: Address:

City-St-Zip: LAS VEGAS, NV 89120 City-St-Zip: HENDERSON, NV 89074

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: LEE W. SHOREY **EVP** 08/23/2007