2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000004101

Entity Name: MORGAN STANLEY MORTGAGE CAPITAL INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
1585 BROADWAY NEW YORK, NY 10036								
Current Mailing Address:				New Mailing Address:				
MORGAN STANELY LAW DEPARTMENT 1221 AVENUE OF THE AMERICAS, 5TH FLOOR NEW YORK, NY 10020				MORGAN STANELY LAW DEPARTMENT 1633 BROADWAY, 25TH FLOOR NEW YORK, NY 10019				
FEI Number:	Number: 13-3208772 FEI Number Applied For () FEI N		FEI Num	nber Not Applicable () Certificate			te of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:							istered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:								
	Electronic	Signature of Registered Agent	t				Date	
Election Campaign Financing Trust Fund Contribution ().								
OFFICERS AND DIRECTORS:				${\bf ADDITIONS/CHANGES\ TO\ OFFICERS\ AND\ DIRECTORS:}$				
Title: Name: Address: City-St-Zip:	CD ()[TUFARIELLO, AN 1585 BROADWA NEW YORK, NY	Y		Title: Name: Address: City-St-Zip:	() (Change () Addition	
Title: Name: Address: City-St-Zip:	PD () I STERN, STEVEN 1221 AVE OF TH NEW YORK, NY	IE AMERICA		Title: Name: Address: City-St-Zip:	() (Change () Addition	
Title: Name: Address: City-St-Zip:	D ()[RUDNER, STEPH 1585 BROADWA NEW YORK, NY	Y		Title: Name: Address: City-St-Zip:	T (X) BRODY, JACQU 750 SEVENTH A' NEW YORK, NY	ELINĒ VENUE	() Addition	
Title: Name: Address: City-St-Zip:	T ()[FORSELL, WILL 750 7TH AVE NEW YORK, NY			Title: Name: Address: City-St-Zip:	S (X) HERZER, CHARI 1633 BROADWA NEW YORK, NY	LENE Y	() Addition	
Title: Name: Address: City-St-Zip:	S (X) I BEESON, GARY 1633 BROADWA NEW YORK, NY	Y		Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	V (X) I AARON, DEBRA 750 SEVENTH A' NEW YORK, NY	VENUE		Title: Name: Address: City-St-Zip:	() (Change () Addition	

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: CHARLENE HERZER S 04/30/2007