## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000004638

Entity Name: MASON MCDUFFIE MORTGAGE CORPORATION

FILED Apr 13, 2009 Secretary of State

| Current Principal Place of Business:                         |   |  | New Principal Place                         | New Principal Place of Business:                               |  |
|--|---|--|---|--|--|
| 2010 CROW CANYON PLACE, SUITE 400<br>SAN RAMON, CA 945831367 |   |  | SUITE 400                                   | 2010 CROW CANYON PLACE<br>SUITE 400<br>SAN RAMON, CA 945831367 |  |
| Current Mailing Address:                                     |   |  | New Mailing Addres                          | New Mailing Address:   |  |
|  | OW CANYON F<br>ION, CA 9458                       | PLACE, SUITE 400<br>31367  |   |  |  |
| FEI Number   | r: 20-2693054                                     | FEI Number Applied For ( )   | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )                              |  |
| Name and   | d Address of (                                    | Current Registered Agent:  | Name and Address                            | of New Registered Agent:                                       |  |
| 155 OFFIC<br>SUITE A   | RED AGENTS<br>DE PLAZA DR<br>SSEE, FL 323         |  |   |  |  |
|  | e named entity<br>e of Florida.                   | submits this statement for the                                     | purpose of changing its registere           | ed office or registered agent, or both,                        |  |
| SIGNATU  | RE:   |  |   |  |  |
|  | Electro   | nic Signature of Registered Ag                                     | gent  | Date   |  |
| Election Ca  | mpaign Financin                                   | g Trust Fund Contribution ( ).                                     |   |  |  |
| OFFICER  | S AND DIREC                                       | CTORS:   | ADDITIONS/CHANG                             | ES TO OFFICERS AND DIRECTOR                                    |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                  | TASKER, HER<br>2010 CROW C                        | ) Delete<br>BERT B<br>ANYON PLACE, SUITE 400<br>CA 945831367       | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                  | DIR (<br>SCHULZ, PAU<br>2041 N. HWY<br>FRANKTOWN, | B3, SUITE C  | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                  | RICHARDSON<br>2010 CROW C                         | ) Delete<br>, MARILYN J<br>:ANYON PLACE, SUITE 400<br>CA 945831367 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                  | SIMPSON, WII<br>2010 CROW C                       | ) Delete<br>LLIAM J<br>ANYON PLACE, SUITE 400<br>CA 945831367      | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition  |  |
| Title:<br>Name:  | DIR (<br>LINCHEY, BRI                             | ) Delete<br>AN T   | Title:<br>Name:                             | ( ) 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: MARILYN J. RICHARDSON SEC 04/13/2009