## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: \_\_

## Apr 23, 2007 8:00 am Secretary of State DOCUMENT # F06000000379 04-23-2007 90261 029 \*\*\*158.75 CLC HOME LOANS, INC. Mailing Address Principal Place of Business 40077397 16855 W. BERNARDO DR., SUITE 100 11440 W. BERNARDO CT., SUITE 390 SAN DIEGO, CA 92127 SAN DIEGO, CA 92127 2. Principal Place of Business - No P.Q. Box # 3. Mailing Address 16855 W. Bernardo Drive Suite, Apt. #, etc. Suite 100 Suite, Apt. #, etc. 04132007 CR2E034 (12/06) Cha-P City & State City & State 4. FEI Number Applied For 72-1606078 San Diego, CA Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired 92127 USA Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 Zip Code 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. I am familiar with, and accept the obligations of registered agent SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. CD Delete TITLE X Addition TITLE COB/Director ☐ Change NAME KATZ, CARY NAME Rob LaBreche 16855 W. BERNARDO DR., SUITE 100 STREET ADDRESS 16855 W. Bernardo Drive, Suite 100 STREET ADDRESS CITY-ST-ZIP SAN DIEGO, CA 92127 CITY-ST-ZIP San Diego, CA 92127 ☐ Delete TITLE Assistant Secretary ☐ Change X Addition TITLE SENECHAL, DIANNE NAME NAME Dianne Senechal 16855 W. Bernardo Drive, Suite 100 STREET ADDRESS 16855 W. BERNARDO DR., SUITE 100 STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP SAN DIEGO, CA 92127 San Diego, CA 92127 CFOS V.P. of Capital Markets Addition ☐ Delete TITLE Change TITLE WOOD, FLIZABETH NAME NAME John Falb 16855 W. Bernardo Drive, Suite 100 STREET ADDRESS 16855 W. BERNARDO DR., SUITE 100 STREET ADDRESS San Diego, CA 92127 CITY-ST-ZIP SAN DIEGO, CA 92127 CITY-ST-7IP ☐ Change ☐ Delete ☐ Addition TITLE TITLE 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-ZIE ☐ Delete TITLE Change Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED

2007 FOR PROFIT CORPORATION

|   | ANNUAL   | REPORT   |   | <u> </u>   |  |  |   |
|---|--|--|---|--|--|--|---|
| DOCUMENT #F0600000379  1. Entity Name   |  |  |   |  | 4  | Ad(  | 20  |
| CLC HOME LOANS, THE   |  |  |   |  |  | 4  |   |
| Principal Place of Business Mailing Address 16855 W. BERNARDO DR., SUITE 100 11440 W. BERNARD SAN DIEGO, CA 92127 SAN DIEGO, CA 921 |  |  |   | A  | ATTACHMENT   |  |   |
| SAIT DIEGO,   |  |  |   |  | H00  | 1731   |   |
|   | Place of Business - No P.O. Box #  |  | 855 W. Bernardo Drive   |  |  |  |   |
| Suite, Apt. #, etc.  City & State   |  | Suite, Apt. #, etc. Suite 100  City & State                    |   | 04132007   |  | CR2E034 (12  | /06)  |
| Zip Country   |  | San Diego, CA Zip Country                                      |   | 72-16  | 72-1606078   Not Applicable  |  |   |
|   | 6. Name and Address of Current   | 92127  | USA   |  | e of Status Desired d Address of New F   | Fee Re   | equired   |
| CORROR  | ATION CERVICE COMPANY  | Name   | Name  |  |  |  |   |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525   |  |  |   | Street Address (P.O. Box Number is Not Acceptable)   |  |  |   |
|   |  |  |   | City FL Zip Code   |  |  |   |
|   | e named entity submits this statement fo<br>tions of registered agent.   | r the purpose of changing its                                  | registered office of  | r registered agent, or b   | oth, in the State of Fl  | lorida. I am familiar  | with, and accept  |
| SIGNATURE   |  |  |   |  |  |  |   |
|   | E NOW!!! FEE IS \$150.00<br>ay 1, 2007 Fee will be \$550.0   | 9. Election Campaig Trust Fund Contr                           |   | \$5.00 May Be<br>Added to Fees   |  |  |   |
| 10.   | OFFICERS AND   |  | 11.   | ADDITIONS  | CHANGES TO OF  | FICERS AND DIREC   | TORS IN 11  |
| NAME STREET ADDRESS CITY-ST-ZIP   |  |  |   | COB/Director Change CXAddition Rob LaBreche 16855 W. Bernardo Drive, Suite 100 San Diego, CA 92127 |  |  |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | P Delete TITLE SENECHAL, DIANNE 16855 W. BERNARDO DR., SUITE 100 SAN DIEGO, CA 92127 CITY-   |  |   | Assistant Secretary Change Addition Dianne Senechal  |  |  |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | CFOS Delete NAMI S 16855 W. BERNARDO DR., SUITE 100 STRE SAN DIEGO, CA 92127 CITY  |  |   | V.P. of Capital Markets ☐ Change △ Addition  John Falb   |  |  |   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | ☐ Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | -  |  | □ Ch   | ange Addition   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | ☐ Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |  |  | ☐ Ch   | ange Addition   |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   |  | ☐ Delete   | NAME STREET ADDRESS CITY-ST-ZIP   |  |  | □ Ch   |   |
| indicated<br>of the cor   | certify that the information supplied with<br>on this report or supplemental report is<br>poration or the receiver or trustee empo<br>or on an attachment with an address, y | true and accurate and that m<br>wered to execute this report a | r the exemptions on<br>the exemptions of the standard of the exemption of the exemptions of the exemption of the exe | contained in Chapter 1<br>have the same legal effor<br>apter 607, Florida Statu                    | <ol> <li>Florida Statutes.</li> <li>act as if made under<br/>les; and that my nan</li> </ol> | I further certify that<br>cath; that I am and<br>ne appears in Block | the information<br>officer or director<br>to or Block 11 if |
| SIGNATURE: 4/17/07 (858) 716-1954   |  |  |   |  |  |  |   |