2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2009
Secretary of State

DOCUMENT# F06000005928

Entity Name: PROVIDENT RESIDENTIAL FUNDING II INC

Current Principal Place of Business:

1633 BAYSHORE HIGHWAY
SUITE 155
BURLINGAME, CA 94010

New Principal Place of Business:

Current Mailing Address:

1633 BAYSHORE HIGHWAY
SUITE 155
BURLINGAME, CA 94010

New Mailing Address:

FEI Number: 20-5079398 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PICA, R CRAIG
Address: 88 LINDA VISTA AVENUE
City-St-Zip: ATHERTON, CA 94028

Title: ST ( ) Delete
Name: BLAKE, MICHELLE CFO
Address: 875 PALOMAR DRIVE
City-St-Zip: REDWOOD CITY, CA 94062

Title: D ( ) Delete
Name: PICA, RALPH
Address: 1633 BAYSHORE HIGHWAY, SUITE 155
City-St-Zip: BURLINGAME, CA 94010

Title: D ( ) Delete
Name: HEREN, MICHAEL CAO
Address: 1633 BAYSHORE HIGHWAY, SUITE 155
City-St-Zip: BURLINGAME, CA 94010

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: MICHELLE C. BLAKE ST 04/24/2009

Electronic Signature of Signing Officer or Director — Date