## **2000 UNIFORM BUSINESS REPORT (UBR)**

## DOCUMENT # F93000001293 **REO HOLDING COMPANY**

## FILED Apr 10, 2000 8:00 am Secretary of State

04-10-2000 90068 001 \*\*\*150.00

| Principal Place of Business  101 CALIFORNIA ST 26TH FLOOR SAN FRANCISCO CA 64111-853 US                                       |                           |  | Mailing Address  |                              |                   |                                    |                                     |   |                 |                          |                                  |               |
|---|---------------------------|--|--|------------------------------|-------------------|------------------------------------|-------------------------------------|---|-----------------|--------------------------|----------------------------------|---------------|
|   |                           |  | 101 CALIFORNIA ST<br>26TH FLOOR<br>SAN FRANCISCO CA 94111-5802<br>US   |                              |                   |                                    | 1 1002/1 <b>00</b> 11 <del>20</del> | 18188 21611 <b>48</b> 611 <b>46</b> 162 | AZIFI AZIFI AZI | D) 1(8(8 1)8†8 1)        | <b>1)11</b> (111) (1 <b>10</b> ) |               |
| 2. Principal P  | lace of Busin             | ess  | 3. Mailing Address   |                              |                   |                                    |                                     |   |                 |                          |                                  |               |
| Suite, Apt.   | #, etc.                   |  | Suite, Apt. #, etc.  |                              |                   |                                    | DO NOT WRITE IN THIS SPACE          |   |                 |                          |                                  |               |
| City & State  | e                         |  | City & State   |                              |                   | 4.                                 | DE-11600/16                         |   |                 | pplied For ot Applicable | }                                |               |
| Zip   |                           | Country  | Zip  | Zip Country                  |                   |                                    | Certificate of                      | tatus Desired                           |                 |                          | ditional                         | 1             |
| 6. Name and Address of Current Registered Agent   |                           |  |  |                              | * -               | ~ <u>~</u> ~; <br>7.               | Name and A                          | Idress of New R                         | egistered A     | gent                     |                                  | 1             |
| CT CORPORATION SYSTEM<br>1200 SOUTH PINE ISLAND RD.<br>PLANTATION FL 33324  |                           |  |  |                              | Name<br>Street Ad | dress (P.O. E                      | 3ox Number is                       | Not Acceptable                          | )               |                          |                                  | ]             |
|   |                           |  |  | (                            | City              |                                    |                                     |   | FL              | Zip Coc                  | de                               | 1             |
| CIONATURE   | , ,                       | y submits this statement for the statement for t | the purpose of changing its in the purpose of changing its in the purpose of changing its interest of of |                              |                   | registered ag                      |                                     | n the State of Flo                      | rida.<br>DATE   |                          |                                  | •             |
| 9. This corporation is eligible to satisfy its Intangible Tax filling requirement and elects to do so. (See criteria on back) |                           |  | FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta   |                              |                   | 50.00                              |                                     |   |                 |                          |                                  |               |
| 11.   |                           | OFFICERS AND D   | IRECTORS   | 12.                          |                   | AC                                 | DITIONS/CH                          | ANGES TO OFF                            | ICERS AND       | DIRECTOR                 | RS IN 11                         | 1 _           |
| TITLE   | DP 12 Delete              |  | TITLE  | ŀ                            | Directo           | rector and President □ Change ☑/   |                                     |   |                 |                          | 6                                |               |
| NAME  | EGAN, GERALD E            |  |  |                              |                   |                                    | bert J. Cook                        |   |                 |                          |                                  |               |
| STREET ADDRESS 875 N. MICHIGAN AVENUE, 41ST F   |                           |  | FLOOR  | STREET A                     |                   | 875 N. Michigan Avenue, 41st Floor |                                     |   |                 |                          |                                  |               |
| CITY-ST-ZIP   | CHICAGO IL 60611-1901     |  |  | CITY-ST-                     |                   |                                    |                                     | ois 606                                 | 11-1901         | L                        |                                  | R2E034 (9/99) |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | 101 CALI                  | H, FREDERICK J<br>FORNIA ST, 26TH FL<br>NCISCO_CA 94111-5853   | ☐ Delete   | TITLE NAME STREET A CITY-ST  | ADDRESS           | Vice Pr                            | resident                            | :                                       |                 | <b>X</b> Change          | ☐ Addition                       | Ö             |
| TITLE NAME STREET ADDRESS   | VP<br>Cole, El            | IZABETH S<br>CHIGAN AVE, 41ST FL   | ☐ Delete   | TITLE<br>NAME<br>STREET A    |                   | - 110-                             |                                     |   |                 | ☐ Change                 | Addition                         |               |
| CITY-ST-ZIP   |                           | IL 60611-1901  |  | CITY-ST-                     | -ZIP              |                                    |                                     |   |                 | - <u>-</u>               |                                  | -             |
| TITLE<br>NAME<br>STREET ADDRESS   | 101 CALI                  | ez, timothy k<br>Fornia St, 26th Fl  | ☐ Delete   | TITLE<br>NAME<br>STREET A    |                   |                                    |                                     |   |                 | ☐ Change                 | ☐ Addition                       |               |
| CITY-ST-ZIP   | 1                         | <u>NCISCO CA 94111-5853</u>  | <u> </u>   | CITY-ST-                     | - ZIP             |                                    |                                     |   |                 |                          |                                  | 1             |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP   | 875 N MI                  | , NORTON F<br>CHIGAN AVE, 41ST FL<br>IL 60611-1901   | ☐ Delete   | TITLE NAME STREET A CITY-ST- |                   |                                    |                                     |   |                 | ☐ Change                 | ☐ Addition                       |               |
| TITLE NAME STREET ADDRESS   | TS<br>FERKULL<br>875 N MI | , PAULA M<br>CHIGAN AVE, 41ST FL   | ☐ Delete   | TITLE NAME STREET A          |                   |                                    |                                     |   |                 | Change                   | ☐ Addition                       |               |
| CITY-ST-ZIP   |                           | IL 60611-1901  |  |                              | [                 |                                    |                                     |   | •               |                          |                                  | ļ             |
| <b>13.</b> I hereby o   | certify that the          | information supplied with t  | his filing does not qualify for  | the exemp                    | tion state        | d in Section                       | 119.07(3)(i), l                     | lorida Statutes. I                      | turther cert    | ity that the i           | information                      | 1             |

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 Statules; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

Paula M. Ferkull

March 22, 2000 266-9300

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Treasurer and Secretary

Daytime Phone #