

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

1-2

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000001424 (9)

1. Corporation Name

INDEPENDENT NATIONAL MORTGAGE CORPORATION



Principal Place of Business

35 N. LAKE AVE.
PASADENA CA 91101

Mailing Address

35 N. LAKE AVE.
PASADENA CA 91101

3. Date Incorporated or Qualified
03/24/1995

3a. Date of Last Report

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

35 N. Lake Avenue

27

Suite, Apt. #, etc.
7th Floor, Legal Dept.

28

City & State
Pasadena, CA

29

Zip
91101

Country

30

4. FEI Number
95-4427753

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, in all capital letters

(NOTE: Registered Agent signature required when filing statement)

DATE

12. OFFICERS AND DIRECTORS

cont'd on attached page

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
P	PERRY, MICHAEL W	35 N. LAKE AVE.	PASADENA CA 91101	<input type="checkbox"/>
VS	CHURNEY, MARIANNE	35 N. LAKE AVE.	PASADENA CA 91101	<input type="checkbox"/>
D	LOEB, DAVID S	35 N. LAKE AVE.	PASADENA CA 91101	<input type="checkbox"/>
D	MOZILO, ANGELO R	35 N. LAKE AVE.	PASADENA CA 91101	<input type="checkbox"/>
D	ABERNATHY, STERLING B	35 N. LAKE AVE.	PASADENA CA 91101	<input type="checkbox"/>
D	WOHL, RICHARD H	35 N. LAKE AVE.	PASADENA CA 91101	<input type="checkbox"/>

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
21 TITLE	22 NAME	23 STREET ADDRESS	24 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
31 TITLE	32 NAME	33 STREET ADDRESS	34 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
41 TITLE	42 NAME	43 STREET ADDRESS	44 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
51 TITLE	52 NAME	53 STREET ADDRESS	54 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
61 TITLE	62 NAME	63 STREET ADDRESS	64 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

000001791890
-04/24/96--01011--009
***200.00

☐ Change ☐ Addition

4.23

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stephanie Irely, Vice President 4/19/96 800-669-2300

Date

Telephone Number

CR2E034 (12/95)

STATE OF FLORIDA
PROFIT CORPORATION ANNUAL REPORT 1996

INDEPENDENT NATIONAL MORTGAGE CORPORATION

Item 12. Officers and Directors (continued)

NAME	Stephanie Ireby	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
TITLE	Vice President, Counsel and Assistant Secretary		
STREET ADDRESS	35 North Lake Avenue		
CITY-ST-ZIP	Pasadena, California 91101		