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FILED  
May 15 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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.  
7TH FLOOR, LEGAL DEPT.  
PASADENA CA 91101-4110



3. Date Incorporated or Qualified

03/24/1995

3a. Date of Last Report

04/23/1996

4. FEI Number

95-4427753

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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 and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME PERRY, MICHAEL W  
STREET ADDRESS 35 N. LAKE AVE.  
CITY-ST-ZIP PASADENA CA 91101

☐ DELETE

TITLE VS  
NAME CHURNEY, MARIANNE  
STREET ADDRESS 35 N. LAKE AVE.  
CITY-ST-ZIP PASADENA CA 91101

☐ DELETE

TITLE D  
NAME LOEB, DAVID S  
STREET ADDRESS 35 N. LAKE AVE.  
CITY-ST-ZIP PASADENA CA 91101

☐ DELETE

TITLE D  
NAME MOZILO, ANGELO R  
STREET ADDRESS 35 N. LAKE AVE.  
CITY-ST-ZIP PASADENA CA 91101

☐ DELETE

TITLE D  
NAME ABERNATHY, STERLING B  
STREET ADDRESS 35 N. LAKE AVE.  
CITY-ST-ZIP PASADENA CA 91101

☒ DELETE

TITLE D  
NAME WOHL, RICHARD H  
STREET ADDRESS 35 N. LAKE AVE.  
CITY-ST-ZIP PASADENA CA 91101

☐ DELETE

1.1 TITLE Director  
1.2 NAME Eric P. Sieracki  
1.3 STREET ADDRESS 35 N. Lake Ave.  
1.4 CITY-ST-ZIP Pasadena, CA 91101

☐ Change ☒ Addition

2.1 TITLE Director  
2.2 NAME Anne McCallion  
2.3 STREET ADDRESS 35 N. Lake Ave.  
2.4 CITY-ST-ZIP Pasadena, CA 91101

☐ Change ☒ Addition

3.1 TITLE Vice President  
3.2 NAME Susan E. McGovney  
3.3 STREET ADDRESS 35 N. Lake Ave.  
3.4 CITY-ST-ZIP Pasadena, CA 91101

☐ Change ☒ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 OF QUALIFIED

800-650-2300

CR2E034 (9/96)