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Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90260 045 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # F95000004466			
1. Corporation Name DITECH FUNDING CORPORATION			
Principal Place of Business 1920 MAIN STREET SUITE 400 AND 600 IRVINE CA 92614		Mailing Address 1920 MAIN STREET SUITE 400 & 900 IRVINE CA 92614 US	
2. Principal Place of Business 21 3200 Park Center Drive		2a. Mailing Address 26 3200 Park Center Drive	
Suite, Apt. #, etc. 22 150, 400, 800, 1400, 1800		Suite, Apt. #, etc. 27 Suite 150	
City & State 23 Costa Mesa, CA 92626		City & State 28 Costa Mesa, CA 92626	
Zip Country 24 92626 25 US		Zip Country 29 92626 30 US	
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET 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 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 NAME STREET ADDRESS CITY-ST-ZIP	P REDDAM, J P 4 PARK PLAZA IRVINE CA 92714 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3200 Park Center Drive Suite 150 Costa Mesa, CA 92626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C PHAM, JOANN 4 PARK PLAZA STE 1200 IRVINE CA <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3200 Park Center Drive, Suite 150 Costa Mesa, Ca 92626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V POZZUOLI, VINCENT 4 PARK PLAZA STE 1200 IRVINE CA <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3200 Park Center Drive, Suite 150 Costa Mesa, CA 92626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPGC BAREN, DANIEL 1920 MAIN ST, SUITE 400 IRVINE CA 92614 <input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3200 Park Center Drive, Suite 150 Costa Mesa, CA 92626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT COTE, BRIAN 1920 MAIN ST, SUITE 400 IRVINE CA 92614 <input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3200 Park Center Drive, Suite 150 Costa Mesa, CA 92626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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, with all other like empowered.

SIGNATURE:  **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Scott Carnahan - President

4-21-1999 (800) 713-4933

Date Daytime Phone #

CR2E034 (1/98)