

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000006127

FILED
Apr 18, 2005
Secretary of State

Entity Name: REILLY MORTGAGE CAPITAL CORPORATION

Current Principal Place of Business:

2010 CORPORATE RIDGE, SUITE 1000
MCLEAN, VA 22102

New Principal Place of Business:

Current Mailing Address:

2010 CORPORATE RIDGE, SUITE 1000
MCLEAN, VA 22102

New Mailing Address:

FEI Number: 54-1548883

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: SZYDLOWSKI, THOMAS C CEO
Address: 2010 CORPORATE RIDGE, SUITE 1000
City-St-Zip: MCLEAN, VA 22102

Title: VTS () Delete
Name: SOMMERS, GALE F SVP
Address: 2010 CORPORATE RIDGE, SUITE 1000
City-St-Zip: MCLEAN, VA

Title: D () Delete
Name: STARK, DOUGLAS D
Address: 890 CLINTON SQUARE, SUITE 890
City-St-Zip: ROCHESTER, NY 14604

Title: V () Delete
Name: FITZGERALD, MAUREEN SVP
Address: 2010 CORPORATE RIDGE, SUITE 1000
City-St-Zip: MCLEAN, VA 22102

Title: V () Delete
Name: AQUILINO, MICHAEL A EVP
Address: 2010 CORPORATE RIDGE, SUITE 1000
City-St-Zip: MCLEAN, VA 22102

Title: V () Delete
Name: SEATS, LAMAR
Address: 2010 CORPORATE RIDGE, SUITE 1000
City-St-Zip: MCLEAN, VA 22102

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:

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 for the exemption stated in Section 119.07(3)(i), 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: GALE F. SOMMERS

VTS

04/18/2005

Electronic Signature of Signing Officer or Director

Date