FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # F9700003245 (4)

WAUSAU MORTGAGE CORPORATION

Principal Place of Business

Mailing Address

FILED Jul 16 1998 8:00am Secretary of State



5820 STONERIDGE MALL RD. SUITE 210 PLEASANTON CA 94588					5820 STONERIDGE MALL RD. SUITE 210 PLEASANTON CA 94588					DO NOT WRITE IN TH	IS SPACE		
										 Date Incorporated or Qualified 06/20/1997 			
2. Principal Pl	ace of Busin	1	2a. Mailing Address					4. Fet Number 84-1165494	+	Applied For Not Applicable			
Suite, Apt.	#, e tc	Suite, Apt. #, etc.						4-4		Additional			
22		27						5. Certificate of Status Desired	Fee F	Required			
City & State	9	City & State						6. Election Campaign Financing		May Be			
23 Z _I p		Co	untry	[28] Zio	28 7 ip Cour			itry		Trust Fund Contribution		to Fees	
24]		25	,	29						8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
		and Ac	Registered	Agent	igent				10. Name and Address of New Registered Agent				
	CORPOR						81	۱ ا	Name				
120				82	5	Street Address (P.O. Box Number is Not Acceptable)							
PLA	NOTATION	FL 333	24				83	 		<u> </u>			
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	•						84	1	Dity		▝┖╸┆┊	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 (amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE	Project Control of the Control of th		name of registered agen		internal control	075. Dano	Incod No.			iriod when reinstating) DATI			
12.	Signature, typica	to tourie	OFFICERS AND			_	3.	O 11. 5	agriative redu	ADDITIONS/CHANGES TO OFFICERS A		PRS IN 12	
TITLE	CP			2 1, 223, 7 2 22	DELETE		A TITLE				Change		
NAME	FLYNN,					1	2 NAME						
STREET ADDRESS			SUITE 210	1	3 STREET	T ADDRESS							
CITY-ST-ZIP	PLEASA	NTON	CA 94588			1	4 CITY-S	31 - Z	iP .				
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NAME			GREGORY C DGE MALL RD,	CHITE 040		2 NAME	TREET ADDRESS CHY-ST-7IP						
STREET ADDRESS			CA 94588	9011E 210									
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NAME STREET ADDRESS						1	2 NAME 3 STREET	AD!	nerec				
CITY-ST-ZIP							3 STREET 4 CITY - S						
14. I hereby c	ertify that th	o inform	ation supplied wit	this filing d	oes not qualify	for the	exemp	tior	n stated in	Section 119.07(3)(i), Florida Statutes. I further	certify that th	e information	
indicatéd (officer or o Block 12 c	on this annu director of th or Block 13 :	ial reper ie corpe f chang	t or supplemental ration or the recei ed, or on an attacl	arınual repor ver or trusled imopt with a	rt is true and ac e empowered to paligress.	ccurate o execu	and the te this	at r rep	my signatu oort as req	ure shall have the same legal effect as if made quired by Chapter 607, Florida Stalules; and th	under oath; t at my name a	hat I am an ppears in	