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Mar 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # F97000003253 (8)

1. Corporation Name
GN MORTGAGE CORPORATION

Principal Place of Business
21731 VENTURA BLVD. SUITE 200
WOODLAND HILLS CA 91364

Mailing Address
21731 VENTURA BLVD. SUITE 200
WOODLAND HILLS CA 91364

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/20/1997

4. FEI Number

36-3913158

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

9. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
528 E. PARK AVE
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 rehashing)

DATE

12. OFFICERS AND DIRECTORS

TITLE CD
NAME LEVY, GERALD J
STREET ADDRESS 4000 W. BROWN DEER RD
CITY-ST-ZIP MILWAUKEE WI 53209 ☐ DELETE

TITLE PD
NAME NEWBY, KIM C
STREET ADDRESS 21731 VENTURA BLVD, SUITE 200
CITY-ST-ZIP WOODLAND HILLS CA 91364 ☐ DELETE

TITLE S
NAME LEVY, BRIAN S
STREET ADDRESS 4000 W. BROWN DEER RD
CITY-ST-ZIP MILWAUKEE WI 53209 ☐ DELETE

TITLE D
NAME LEVY, DOUGLAS S
STREET ADDRESS 4000 W. BROWN DEER RD
CITY-ST-ZIP MILWAUKEE WI 53209 ☐ DELETE

TITLE T
NAME BORCHERT, LARRY
STREET ADDRESS 4000 W. BROWN DEER RD
CITY-ST-ZIP MILWAUKEE WI 53209 ☐ DELETE

TITLE D
NAME STARK, PHILLIP
STREET ADDRESS 717 JOHN NOLEN DR
CITY-ST-ZIP MADISON WI 53713 ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME WENDY SELIG PRIEB
1.3 STREET ADDRESS BREWERS BASEBALL CLUB
1.4 CITY-ST-ZIP N/A ☐ Change ☒ Addition

2.1 TITLE D
2.2 NAME ABE A. TANNENBAUM
2.3 STREET ADDRESS 2260 W. GOOD HOPE RD.
2.4 CITY-ST-ZIP MILWAUKEE, WI 53209 ☐ Change ☒ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ 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 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: KIM C. NEWBY

2/26/98

(818) 710-8000