


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

FILED

Jan 23 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **F97000004470 (7)**

1. Corporation Name

MISSION HILLS MORTGAGE CORPORATION

Principal Place of Business

**1403 N. TUSTIN AVE., #280
SANTA ANA CA 92705**

Mailing Address

**1403 N. TUSTIN AVE., #280
SANTA ANA CA 92705**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/25/1997

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

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

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324**

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

TITLE	PDC	<input type="checkbox"/> DELETE
NAME	TARBELL, RONALD M	
STREET ADDRESS	1403 N. TUSTIN AVE., #280	
CITY-ST-ZIP	SANTA ANA CA 92705	

TITLE	P	<input type="checkbox"/> DELETE
NAME	LEDBETTER, JAY D	
STREET ADDRESS	1403 N. TUSTIN AVE., #280	
CITY-ST-ZIP	SANTA ANA CA 92705	

TITLE	VCFO	<input checked="" type="checkbox"/> DELETE
NAME	SCHRADER, JON C	
STREET ADDRESS	1403 N. TUSTIN AVE., #280	
CITY-ST-ZIP	SANTA ANA CA 92705	

TITLE	V	<input type="checkbox"/> DELETE
NAME	GUBA, JOSEPH A	
STREET ADDRESS	1403 N. TUSTIN AVE., #280	
CITY-ST-ZIP	SANTA ANA CA 92705	

TITLE	SV	<input type="checkbox"/> DELETE
NAME	BONITI, MARSHA K	
STREET ADDRESS	1403 N. TUSTIN AVE., #280	
CITY-ST-ZIP	SANTA ANA CA 92705	

TITLE	V	<input type="checkbox"/> DELETE
NAME	ISRAEL, LEONARD II	
STREET ADDRESS	1403 N. TUSTIN AVE., #280	
CITY-ST-ZIP	SANTA ANA CA 92705	

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:

Joseph A. Guba **RECEIVED** *J. Guba* **1-6-98** **714-972-3832**

CR2E034 (10/97)