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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F98000005893

1. Corporation Name

GENERAL MORTGAGE ACCEPTANCE CORPORATION

Principal Place	of Business

FILED Mar 10, 1999 8:00 am **Secretary of State**

03-10-1999 90270 018 ***150.00



Principal Place o	of Business	Mailing Ad	ddress									
DIO N BATAVIA STREET. STE C 1010 N BATAVIA STREET. STE C ORANGE CA 92867 ORANGE CA 92867						DO NOT WRITE IN THIS SPACE						
							3.	Date Incorporated or Qualifed			•	
							- 1	10/22/1998				
2. Principal Plac	e of Business	2a. Mailing	g Address				4.	. FEI Number		App	lied For	
1		26						95-4585498			Applicable	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.					5.	5. Certificate of Status Desired		. 75 Ad	lditional uired	
City & State			City & State				6.	6. Election Campaign Financing Trust Fund Contribution Added to				
Zip	Country 25	Zip	Zip Coi				8.	8. This corporation owes the current year Intangible Personal Property Tax. Yes No				
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent							
				1	81	Name						
NRAI SERVICES INC			ļ.	32	Cteant /	t Address (P.O. Box Number is Not Acceptable)						
526 EAST PARK AVE					32 Suggit Address (F. O. Dox Humber is Not Acceptable)							
TALLAHASSEE FL 32314			1	В3								
				1	B4	City			FL 85	Zip Co	ode	
office or red	the provisions of Sections 607.0502 istered agent, or both, in the State of familiar with, and accept the obligation	Florida, Such	n change was auth	norized .	by t	the corpo	corporation ration's bo	on submits this statement for the purpos poard of directors. I hereby accept the a	se of chang ippointmen	ing its regi	egistered stered	
SIGNATURE _		. Fra. Flair: 4	ANOTE: D	naiotorad A	onr'	- evaneture -	cavinad when	n rejectating) DA1	TE.			
				13.	gan	signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				RS IN 12		
					1.1 TITLE					hange	Addition	
IIILE	7310			1	-				_	-		

LAM, JULIE 1.2 NAME 1.3 STREET ADDRESS 1010 N BATAVIA STREET, STE C STREET ADDRESS ORANGE CA 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE TITLE 2.1 TITLE MC DADE, BRUCE 22 NAME NAME 1010 N BATAVIA STREET, STE C 2.3 STREET ADDRESS STREET ADDRESS **ORANGE CA** 2. 4 CITY-ST-ZIP CITY-ST-ZIF Addition ☐ Change DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 cyfrustee 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 ith all other like empowered.

SIGNATURE AND THE

CR2E034 (11/98)