

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# M99000001386

FILED
Jan 08, 2003
Secretary of State

Entity Name: FINANCE AMERICA, LLC

Current Principal Place of Business:

16802 ASTON STREET
IRVINE, CA 92606

New Principal Place of Business:

Current Mailing Address:

16802 ASTON STREET
IRVINE, CA 92606

New Mailing Address:

FEI Number: 06-1551833

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: CORNELL, KAREN H
Address: 15301 SPECTRUM DRIVE, SUITE 370
City-St-Zip: ADDISON, TX 75001

Title: MGR () Delete
Name: LIBMAN, BRIAN
Address: METRO CENTER, 1 STATION PL., 4TH FLOOR
City-St-Zip: STAMFORD, CT 06902

Title: MGR () Delete
Name: RICE, ARTHUR K
Address: 16802 ASTON STREET
City-St-Zip: IRVINE, CA 92606

Title: MGR () Delete
Name: FLEMING, GRAHAM
Address: 16802 ASTON ST.
City-St-Zip: IRVING, CA 92606

Title: MGRM () Delete
Name: VESTRI, ERMETE A
Address: 16802 ASTON STREET
City-St-Zip: IRVINE, CA 92606

ADDITIONS/CHANGES:

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
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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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KAREN H. CORNELL

MGR

01/08/2003

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date