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FILED
May 15 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 # P26658 (5)
1. Corporation Name
KAUFMAN AND BROAD MORTGAGE COMPANY

Principal Place of Business
21650 OXNARD STREET
3RD FLOOR
WOODLAND HILLS CA 91367
US

Mailing Address
10990 WILSHIRE BLVD
7TH FLOOR
LOS ANGELES CA 90024
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/25/1989

4. FEI Number
38-1781921

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.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 Zip Code

10. Name and Address of New Registered Agent

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 true if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE VP
NAME CRIVELLI, MARK
STREET ADDRESS 21650 OXNARD ST., 3RD FLOOR
CITY-ST-ZIP WOODLAND HILLS CA

TITLE DP
NAME SCHREINER, DANIEL
STREET ADDRESS 21650 OXNARD ST., 3RD FLOOR
CITY-ST-ZIP WOODLAND HILLS CA

TITLE D
NAME PACHINO, BARTON P
STREET ADDRESS 10990 WILASHIRE BLVD., 7TH FLOOR
CITY-ST-ZIP LOS ANGELES CA

TITLE DVP
NAME HENN, MICHAEL F
STREET ADDRESS 10990 WILSHIRE BLVD., 7TH FLOOR
CITY-ST-ZIP LOS ANGELES CA

TITLE T
NAME DOUGLAS, GARY
STREET ADDRESS 21650 OXNARD ST., 3RD FLOOR
CITY-ST-ZIP WOODLAND HILLS CA

TITLE S
NAME KING, KIMBERLY N.
STREET ADDRESS 10990 WILSHIRE BLVD., 7TH FLOOR
CITY-ST-ZIP LOS ANGELES CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP Woodland Hills, CA 91367

2.1 TITLE AS ☐ Change ☒ Addition
2.2 NAME Cory F. Cohen
2.3 STREET ADDRESS 10990 Wilshire Blvd., 7th Floor
2.4 CITY-ST-ZIP Los Angeles, CA 90024

3.1 TITLE DAS ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS 10990 Wilshire Blvd., 7th Floor
3.4 CITY-ST-ZIP Los Angeles, CA 90024

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP Los Angeles, CA 90024

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP Woodland Hills, CA 91367

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP Los Angeles, CA 90024

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: Cory F. Cohen, Assistant Secretary 4/22/98 (310) 231-4000

CR2E034 (10/97)