

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90080 032 ***150.00

DOCUMENT # P33166					
1. Entity Name COUNTRYWIDE SERVICING EXCHANGE, INCORPORATED COUNTRYWIDE SERVICING EXCHANGE					
Principal Place of Business 4500 PARK GRANADA CALABASAS, CA 91302 US			Mailing Address 8521 FALLBROOK AVENUE CANOGA PARK, CA 91304 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address 8521 Fallbrook Ave, WH-11			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State West Hills, CA		4. FEI Number 95-4260233	
Zip		Country		Applied For Not Applicable	
Zip 91304		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOZILO, ANGELO R 4500 PARK GRANADA BLVD CALABASAS, CA 91302	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	4500 Park Granada
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KURLAND, STANFORD L 4500 PARK GRANADA BLVD CALABASAS, CA 91302	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	4500 Park Granada
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPSD KRIPALANI, RANJIT 4500 PARK GRANADA BLVD CALABASAS, CA 91302	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	4500 Park Granada
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MDCF HIVELY, STEVEN 4500 PARK GRANADA BLVD CALABASAS, CA 91302	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	4500 Park Granada
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS DANIEL, GLENDA J 5220 LAS VIRGENES RD CALABASAS, CA 91302	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	4500 Park Granada
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EMDC SAMBOL, DAVID 4500 PARK GRANADA BLVD CALABASAS, CA 91302	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	4500 Park Granada
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Glenda J. Daniel, Assistant Secretary			03/05/2007 <small>Date</small>		(818) 316-8454 <small>Daytime Phone #</small>