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Feb 05 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P37297 (9)

1. Corporation Name  
NORTH AMERICAN MORTGAGE COMPANY

Principal Place of Business

3883 AIRWAY DRIVE  
SANTA ROSA CA 95403

Mailing Address

3883 AIRWAY DRIVE  
SANTA ROSA CA 95403-1648



3. Date Incorporated or Qualified

01/29/1992

3a. Date of Last Report

02/06/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

City & State

29

City & State

Country

30

4. FEI Number

68-0267088

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ 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	CD	<input type="checkbox"/> DELETE
NAME	FARRELL, JOHN F., JR.	
STREET ADDRESS	3883 AIRWAY DRIVE	
CITY - ST - ZIP	SANTA ROSA CA	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	HODEL, TERRANCE G.	
STREET ADDRESS	3883 AIRWAY DRIVE	
CITY - ST - ZIP	SANTA ROSA CA	
TITLE	VS	<input type="checkbox"/> DELETE
NAME	VOGT, CAROLYN O.	
STREET ADDRESS	3883 AIRWAY DRIVE	
CITY - ST - ZIP	SANTA ROSA CA	
TITLE	CAO	<input type="checkbox"/> DELETE
NAME	GALLAGHER, ROBERT J.	
STREET ADDRESS	3883 AIRWAY DRIVE	
CITY - ST - ZIP	SANTA ROSA CA	
TITLE	CFO	<input type="checkbox"/> DELETE
NAME	HUGHES, MARTIN S.	
STREET ADDRESS	3883 AIRWAY DRIVE	
CITY - ST - ZIP	SANTA ROSA FL	
TITLE	See Attached Schedule A & B	<input type="checkbox"/> DELETE
NAME	for listing of additional officers	
STREET ADDRESS	and directors.	
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	C/D/CEO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Farrell, John F., Jr.	
1.3 STREET ADDRESS	767 Third Avenue	
1.4 CITY - ST - ZIP	New York, NY 10017	
2.1 TITLE	P/D/COO	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Hodel, Terrance G.	
2.3 STREET ADDRESS	3883 Airway Drive	
2.4 CITY - ST - ZIP	Santa Rosa, CA 95403	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	CAO/V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Gallagher, Robert J.	
4.3 STREET ADDRESS	3883 Airway Drive	
4.4 CITY - ST - ZIP	Santa Rosa, CA 95403	
5.1 TITLE	CFO/V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	Hughes, Martin S.	
5.3 STREET ADDRESS	3883 Airway Drive	
5.4 CITY - ST - ZIP	Santa Rosa, CA 95403	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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.

(707)546-3310

SIGNATURE:

*Carolyn Owens Vogt*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

REQUIRED Carolyn Owens Vogt Jan. 22, 1997

Date

Daytime Phone #

CR2E034 (9/96)

**North American Mortgage Company**  
**Schedule A-List of Officers**

<u>Name</u>	<u>Position</u>	<u>Business Address</u>
1) John F. Farrell	Chief Executive Officer	767 Third Avenue New York, NY 10017
2) Terrance G. Hodel	President	3883 Airway Drive Santa Rosa, CA 95403
3) Robert H. Gallagher	Chief Administrative	3883 Airway Drive Santa Rosa, CA 95403
4) Martin S. Hughes	Chief Financial Officer	3883 Airway Drive Santa Rosa, CA 95403
5) Michael Conway	Executive Vice President	3883 Airway Drive Santa Rosa, CA 95403
6) Harold B (Pete) Bonnikson	Executive Vice President	3883 Airway Drive Santa Rosa, CA 95403
7) Robert A. Rosen	Executive Vice President	3883 Airway Drive Santa Rosa, CA 95403
8) Carolyn Owens Vogt	Secretary & Senior Vice President	3883 Airway Drive Santa Rosa, CA 95403

**NORTH AMERICAN MORTGAGE COMPANY**  
**Schedule B-List of Directors**

<b>Name</b>	<b>Position</b>	<b>Business Address</b>
1) John F. Farrell	Director, Chairman of the Board	767 Third Avenue New York, NY 10017
2) Terrance G. Hodel	Director	3883 Airway Drive Santa Rosa, CA 95403
3) William L. Brown	Director	100 Federal Street Boston, MA 02106
4) James B. Nicholson	Director	1101 Harper Avenue Detroit, MI 48213
5) William F. Connell	Director	1 International Place 31st Floor Boston, MA 02110
6) William O. Murphy	Director	425 Lexington Avenue New York, NY 10017
7) Robert J. Murray	Director	Prudential Tower Bldg. Boston, MA 02199
8) Magna L. Dodge	Director	20 Wood End Lane Bronxville, NY 10708