

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **831546** (7)

1. Corporation Name  
**PMI MORTGAGE INSURANCE COMPANY**



Principal Place of Business: **601 MONTGOMERY STREET SAN FRANCISCO CA 94111**  
Mailing Address: **601 MONTGOMERY STREET SAN FRANCISCO CA 94111**

3. Date Incorporated or Qualified: **12/31/1973**  
3a. Date of Last Report: **04/18/1995**  
4. FEI Number: **94-2208266**  
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 has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

2. Principal Place of Business  
21. Suite, Apt. #, etc.  
22. City & State  
23. Zip  
24. Country  
25. Country  
2a. Mailing Address  
26. Suite, Apt. #, etc.  
27. City & State  
28. Zip  
29. Country  
30. Country

**9. Name and Address of Current Registered Agent**

**INSURANCE COMMISSIONER  
THE CAPITOL BLDG.  
TALLAHASSEE FL 32399**

**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: \_\_\_\_\_ DATE: \_\_\_\_\_

**12. OFFICERS AND DIRECTORS**

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

TITLE	VP	<input type="checkbox"/> DELETE
NAME	PORTER, LLOYD	
STREET ADDRESS	601 MONTGOMERY ST	
CITY-STATE-ZIP	SAN FRANCISCO CA	
TITLE	SVD	<input type="checkbox"/> DELETE
NAME	BREED, GEORGE G.	
STREET ADDRESS	1142 UNION STREET	
CITY-STATE-ZIP	SAN FRANCISCO CA	
TITLE	TDV	<input type="checkbox"/> DELETE
NAME	LORENZEN, JOHN M., JR.	
STREET ADDRESS	185 EDINBURGH CIR	
CITY-STATE-ZIP	DANVILLE CA	
TITLE	PDC	<input type="checkbox"/> DELETE
NAME	HAUGHTON, W. ROGER	
STREET ADDRESS	1819 ST. NORBERT	
CITY-STATE-ZIP	DANVILLE CA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	WAGNER, JAMES R.	
STREET ADDRESS	233 GRANELLI AVENUE	
CITY-STATE-ZIP	HALF MOON BAY CA	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	SCIONTI, ALFRED P.	
STREET ADDRESS	TWO MID-AMERICA PLAZA, STE 1000	
CITY-STATE-ZIP	OAKBROOK TERRACE IL	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	SVD
6.3 STREET ADDRESS	Bradley M. Shuster
6.4 CITY-STATE-ZIP	601 Montgomery Street San Francisco, CA 94111

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *George G. Breed*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**George G. Breed**

2/7/96 (800) 288-1970  
Date Phone #

CR2E034 (12/95)

831546

PAGE 2

**PMI MORTGAGE INSURANCE CO.**

**OFFICERS**  
(as of 8/1/95)

W. Roger Haughton	President and Chief Executive Officer
John M. Lorenzen, Jr.	Executive Vice President, Chief Financial Officer, and Assistant Secretary
Claude J. Seaman	Executive Vice President and Assistant Secretary
L. Stephen Smith	Executive Vice President
George G. Breed	Senior Vice President, General Counsel, and Secretary
Bradley M. Shuster	Senior Vice President, Treasurer and Assistant Secretary
Walter E. Campion	Vice President
Henry W. Hansen	Vice President
Margaret M. Heater	Vice President
Susan E. King	Vice President
Juliette B. Madison	Vice President
Lloyd A. Porter	Vice President
Kathleen R. Schroeder	Vice President and Assistant Secretary
Arthur P. Slepian	Vice President
William A. Seymore	Vice President and Controller
Harvey W. Syverson	Vice President and Assistant Secretary
James R. Wagner	Vice President
Mike E. Warner	Vice President and Assistant Secretary
Mark C. Berkowitz	Assistant Vice President
Phyllis A. Wilson	Assistant Vice President and Assistant Secretary

**ADDRESS:**

PMI Mortgage Insurance Co.  
601 Montgomery Street  
San Francisco, CA 94111

831546

PAGE 3

**PMI MORTGAGE INSURANCE CO.**

**DIRECTORS**  
(as of 9/11/95)

W. Roger Haughton - Chairman  
George G. Breed  
John M. Lorenzen, Jr.  
Claude J. Seaman  
Bradley M. Shuster  
L. Stephen Smith

Address:

PMI MORTGAGE INSURANCE CO.  
601 Montgomery St.  
San Francisco, California 94111