

FILE-NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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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
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DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified 12/31/1973	
4. FEI Number 94-2208266	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

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
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	PORTER, LLOYD	
STREET ADDRESS	001 MONTGOMERY ST	
CITY-ST-ZIP	SAN FRANCISCO CA	
TITLE	SVD	<input type="checkbox"/> DELETE
NAME	BACIGALUPI, VICTOR J.	
STREET ADDRESS	601 MONTGOMERY ST.	
CITY-ST-ZIP	SAN FRANCISCO CA	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	LORENZEN, JOHN M., JR.	
STREET ADDRESS	185 EDINBURGH CIR	
CITY-ST-ZIP	DANVILLE CA	
TITLE	VDT	<input type="checkbox"/> DELETE
NAME	HAUGHTON, W. ROGER	
STREET ADDRESS	1819 ST. NORBERT	
CITY-ST-ZIP	DANVILLE CA	
TITLE	V	<input type="checkbox"/> DELETE
NAME	WAGNER, JAMES R.	
STREET ADDRESS	233 GRANELLI AVENUE	
CITY-ST-ZIP	HALF MOON BAY CA	
TITLE	VDT	<input type="checkbox"/> DELETE
NAME	SHUSTER, BRADLEY M.	
STREET ADDRESS	601 MONTGOMERY ST	
CITY-ST-ZIP	SAN FRANCISCO CA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	PDC
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
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 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.

CR2E034 (10/97)

PMI MORTGAGE INSURANCE CO.

DIRECTORS

W. Roger Haughton - Chairman
Victor J. Bacigalupi
Thomas C. Brown
John H. Fulford
John M. Lorenzen, Jr.
Daniel L. Roberts
Claude J. Seaman
William A. Seymore
Bradley M. Shuster
L. Stephen Smith
Phyllis A. Wilson

Business Address: 601 Montgomery Street
San Francisco, CA 94111

PMI MORTGAGE INSURANCE CO.

OFFICERS

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
Victor J. Bacigalupi	Senior Vice President, General Counsel, and Secretary
Thomas C. Brown	Senior Vice President--National Accounts
John H. Fulford	Senior Vice President--National Sales
Daniel L. Roberts	Senior Vice President and Chief Information Officer
Bradley M. Shuster	Senior Vice President, Treasurer, Chief Investment Officer and Assistant Secretary
Joanne M. Berkowitz	Vice President
Walter E. Champion	Vice President
Henry W. Hansen	Vice President
Margaret M. Heater	Vice President
David H. Katkov	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
Phyllis A. Wilson	Vice President and Assistant Secretary
Mark C. Berkowitz	Assistant Vice President
Charles F. Broom	Assistant Vice President
John S. Wright	Assistant Vice President

Business Address: 601 Montgomery Street
San Francisco, CA 94111