## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000007710

Entity Name: CALIFORNIA RECONVEYANCE COMPANY

FILED Mar 23, 2009 Secretary of State

| Current Principal Place of Business:  |   |                              |         | New Principal Place of Business:                          |   |             |                 |
|---|---|------------------------------|---------|---|---|-------------|-----------------|
| 9200 OAKDALE AVENUE<br>CHATSWORTH, CA 91311   |   |                              |         | 9200 OAKDALE AVENUE<br>CHATSWORTH, CA 91311 US            |   |             |                 |
| Current Mailing Address:  |   |                              |         | New Mailing Address:                                      |   |             |                 |
| 1301 2ND AVE., WMC3501<br>SEATTLE, WA 98101   |   |                              |         | 4 CHASE METROTECH<br>FLOOR 03<br>BROOKLYN, NY 11245 US    |   |             |                 |
| FEI Number: 95-6043060 FEI Number Applied For ( ) FEI N   |   |                              | FEI Nun | mber Not Applicable ( ) Certificate of Status Desired ( ) |   |             |                 |
| Name and Address of Current Registered Agent:   |   |                              |         | Name and Address of New Registered Agent:                 |   |             |                 |
| CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US  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. |   |                              |         |   |   |             |                 |
| SIGNATUR  |   |                              |         |   |   |             |                 |
| Electronic Signature of Registered Agent  |   |                              |         | <br>Date  |   |             |                 |
| Election Carr   | npaign Financing  | Trust Fund Contribution ( ). |         |   |   |             |                 |
| OFFICERS AND DIRECTORS:   |   |                              |         | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:              |   |             |                 |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | AS () E<br>PROCTOR, ELIZ<br>1301 2ND AVE., S<br>SEATTLE, WA 9   | 36TH FLR.                    |         | Title:<br>Name:<br>Address:<br>City-St-Zip:               | P (X)<br>DURDAN, SALL<br>270 PARK AVEN<br>NEW YORK, NY  | Y<br>NUE    | ) Addition      |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | P () E<br>KARWHITE, SAN<br>1301 2ND AVE., S<br>SEATTLE, WA 9    | 30TH FLR.                    |         | Title:<br>Name:<br>Address:<br>City-St-Zip:               | T (X)<br>FITZGERALD, L<br>270 PARK AVEN<br>NEW YORK, NY | ISA<br>NUE  | ) Addition<br>S |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | SVP ()E<br>BROUWER, CUR<br>1301 2ND AVE., SEATTLE, WA 9         | 32ND FLR.                    |         | Title:<br>Name:<br>Address:<br>City-St-Zip:               | S (X)<br>HORAN, ANTHO<br>270 PARK AVEN<br>NEW YORK, NY  | NY          | ) Addition<br>S |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | DS () E<br>KILLIEN, CATHAI<br>1301 2ND AVE., 3<br>SEATTLE, WA 9 | 35TH FLR.                    |         | Title:<br>Name:<br>Address:<br>City-St-Zip:               | V (X)<br>MEADE, COLLE<br>4 CHASE METR<br>BROOKLYN, NY   | EN<br>OTECH | ) Addition      |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | DT () E<br>LONGBRAKE, W<br>1301 2ND AVE., 3<br>SEATTLE, WA 9    | 33RD FLR.                    |         | Title:<br>Name:<br>Address:<br>City-St-Zip:               | D (X)<br>HORAN, ANTHO<br>270 PARK AVEN<br>NEW YORK, NY  | NY<br>NUE   | ) Addition      |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D (X) I<br>BERENS, HENRY<br>7301 BAYMEADO<br>JACKSONVILLE,      | DWS WAY                      |         | Title:<br>Name:<br>Address:<br>City-St-Zip:               | ( )   | Change (    | ) Addition      |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: COLLEEN MEADE V 03/23/2009