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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## Jun 24, 1999 8:00 am Secretary of State

06-24-1999 90004 013 \*\*\*550.00

DOCUMENT #  1. Corporation Name	F94000002095
i. Corporation Name	

CALIFORNIA LENDING GROUP, INC.								
Principal Plac	e of Business	Mailing Address			119119			
3351 MICHELSO	ON DR #100	3351 MICHELSON DR						
SUITE 100		#100 IDMAE CA 00010			DO NOT W	RITE IN TH	IS SPACE	
<b>rvine ca 926</b> 1 Us	12	IRVINE CA 92612 US			3. Date Incorporated or Qualife		<del>-</del>	
US		,			04/21/1994			
2 Principal B	Place of Business	2a. Mailing Address			4. FEI Number		- App	lied For
<del></del>		26		33-0407459		<del> </del>	Applicable	
Suite, Apt.	# etc	Suite, Apt. #, etc.					\$8.75 Ac	
2	#, Glc.	27			5. Certifcate of Status Desired		Fee Req	
City & Stat	te	City & State			6. Election Campaign Financin	ın _	\$5.00 N	Jav Re
_		28			Trust Fund Contribution	g 🗆	Added to	
3∫ Zip	Country	Zip	Countr	·	8. This corporation owes the c	urrent vear l	ntangible	
4	25	29 3		,	Personal Property Tax.			□No
4	9. Name and Address of Curre		<del>,,,</del>		10. Name and Address of Nev	v Registere	d Agent	
<del></del>	- Italio and Madress of Sarie		81	Name	<del></del>			_
CT	CORPORATION SYSTEM			<u> </u>				_
1200	SOUTH PINE ISLAND ROAD		82	Street	Address (P.O. Box Number is Not Acce	ptable)		
	NTATION FL 33324		83	+-			_	_
•								
			84	City		F	85 Zip Co	ode
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE. R	legistered Age	nt signature i	required when reinstating)	DATÉ		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO	OFFICERS /	_	
TITLE	P	☐ DELETE	1.1 TITLE		v		Change	XAddition
NAME.	SWARTZ, LARRY A		1.2 NAME		GEORGE TANCAS			
STREET ADDRESS			1.3 STREE		OCCCC CATER CUICANNIA			
CITY-ST-ZIP	LAGUNA NIGUEL CA			TADORESS	28961 CALLE SUSANNA			
TITLE	V		1.4 CITY-1		1	CA		_
	1 ¥	₩ DELETE	1.4 CITY-: 2.1 TITLE		SAN JUAN CAPISTRANO,	_CA	Change	Addition
NAME	I	<b>∑</b> DELETE	_	ST-ZIP	1	CA	Change	Addition
	DUDEN, JOHN	💢 DELETE	2.1 TITLE 2.2 NAME	ST-ZIP	1	CA	Change	Addition
STREET ADDRESS	DUDEN, JOHN 5 MOUNTAIN GATE	💢 DELETE	2.1 TITLE 2.2 NAME	ST-ZIP ET ADDRESS	1	CA	☐ Change	Addition
STREET ADDRESS	DUDEN, JOHN 5 MOUNTAIN GATE COTO DE CAZA CA	<b>∑</b> DELETE □ DELETE	2.1 TITLE 2.2 NAME 2.3 STREE	ST-ZIP ET ADDRESS	1	CA	☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE	DUDEN, JOHN 5 MOUNTAIN GATE COTO DE CAZA CA CFO		2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-	ST-ZIP ET ADDRESS	1	CA		
STREET ADDRESS CITY-ST-ZIP TITLE NAME	DUDEN, JOHN 5 MOUNTAIN GATE COTO DE CAZA CA CFO LOWE, ROBERT		2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ST-ZIP ET ADDRESS	1	CA		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	DUDEN, JOHN 5 MOUNTAIN GATE COTO DE CAZA CA CFO LOWE, ROBERT 1005 MILES COURT		2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE	ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS	1	CA		
STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP	DUDEN, JOHN 5 MOUNTAIN GATE COTO DE CAZA CA CFO LOWE, ROBERT 1005 MILES COURT ANAHEIM CA		2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME	ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS	1	CA		Addition
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TREET ADDRESS TTY-ST-ZIP TILE AME TREET ADDRESS TTY-ST-ZIP TILE AME TREET ADDRESS TREET ADDRESS TREET ADDRESS	DUDEN, JOHN 5 MOUNTAIN GATE COTO DE CAZA CA CFO LOWE, ROBERT 1005 MILES COURT ANAHEIM CA SECR JOHN H QUINN JR 9900 ALTO DRIVE LA MESA CA 91941	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE 5.2 NAME	ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADORESS ST-ZIP	1	CA	☐ Change	☐ Additio

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, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

**SIGNATURE:** 

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

JOHN H. QUINN, JR. SECRETARY

5/1/99

(800)424-9722

☐ Change

☐ Addition

544904-7004-20 FS-1000000005

## **DIRECTORS**

F94000002095

- James J. Bigham
   277 Park Avenue
   New York, NY 10172
- Jerome Perelson
   277 Park Ave.
   New York, NY 10172
- Michael Festo
   277 Park Ave.
   New York, NY 10172
- 4. Scott Mannes 277 Park Ave. New York, NY 10172
- James E. Moore
   277 Park Avenue
   New York, NY 10172