

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002896

FILED  
Feb 17, 2004  
Secretary of State

Entity Name: ACCREDITED HOME LENDERS, INC.

## Current Principal Place of Business:

15030 AVE. OF SCIENCE  
SUITE 100  
SAN DIEGO, CA 92128

## New Principal Place of Business:

15090 AVE. OF SCIENCE  
SAN DIEGO, CA 92128

## Current Mailing Address:

15030 AVE. OF SCIENCE  
SUITE 100  
SAN DIEGO, CA 92128

## New Mailing Address:

15090 AVE. OF SCIENCE  
SAN DIEGO, CA 92128

FEI Number: 33-0426859

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD.  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete  
Name: KONRATH, JAMES A  
Address: 15030 AVE. OF SCIENCE, #100  
City-St-Zip: SAN DIEGO, CA 92128

Title: VS ( ) Delete  
Name: MCKEWON, RAY W  
Address: 15030 AVE. OF SCIENCE, #100  
City-St-Zip: SAN DIEGO, CA

Title: D ( ) Delete  
Name: GUNDERSON, JODY A  
Address: 12700 WHITEWATER  
City-St-Zip: HOPKINS, MN 553439438

Title: PCOO ( ) Delete  
Name: LYNDON, JOSEPH J  
Address: 15030 AVE OF SCIENCE, #100  
City-St-Zip: SAN DIEGO, CA 92128

Title: CFO ( ) Delete  
Name: BUCHANAN, JOHN  
Address: 15030 AVENUE OF SCIENCE, # 100  
City-St-Zip: SAN DIEGO, CA 92128

Title: D ( ) Delete  
Name: ROBBINS, JOHN M.,  
Address: 10421 WATERIDGE CIRCLE #250  
City-St-Zip: SAN DIEGO, CA 92121

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN S BUCHANAN

CFO

02/17/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date