

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90388 008 ***150.00

DOCUMENT # F99000004997

1. Entity Name

ELECTRONIC MORTGAGE AFFILIATES, INC.

Principal Place of Business

6541 REGIONAL STREET
 DUBLIN CA 94568

Mailing Address

6541 REGIONAL STREET
 DUBLIN CA 94568-2913

2. Principal Place of Business

4457 Willow Rd, Ste. 200

3. Mailing Address

4457 Willow Rd.

Suite, Apt. #, etc.

Pleasanton, CA

Suite, Apt. #, etc.

Ste. 200

City & State

Pleasanton CA

4. FEI Number

94-3288780

Applied For

Not Applicable

Zip

94508

Country

USA

Zip

94508

Country

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ANDERMAN, SIG	
STREET ADDRESS	2030 VALLEJO STREET	
CITY-ST-ZIP	SAN FRANCISCO CA 94123	
TITLE	CFO	<input type="checkbox"/> Delete
NAME	NEBEL, ROBIN CFO	
STREET ADDRESS	139 WALDO AVENUE	
CITY-ST-ZIP	PIEDMONT CA 94611	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	MITCHELL, STEVE	
STREET ADDRESS	15 TOPPER COURT	
CITY-ST-ZIP	LAFAYETTE CA 94549	
TITLE	V	<input type="checkbox"/> Delete
NAME	DEFFINA, MICHAEL	
STREET ADDRESS	521 BLACKHAWK CLUB DRIVE	
CITY-ST-ZIP	DANVILLE CA 94506	
TITLE	V	<input type="checkbox"/> Delete
NAME	BICHARD, BILL	
STREET ADDRESS	156 HASLEMER COURT	
CITY-ST-ZIP	LAFAYETTE CA 94549	
TITLE	V	<input type="checkbox"/> Delete
NAME	MOBASHER, NOOSHY	
STREET ADDRESS	1 RELIEZ MANOR	
CITY-ST-ZIP	LAFAYETTE CA 94569	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	C/D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ringwald, Art	
STREET ADDRESS	151 Camino Don Miguel	
CITY-ST-ZIP	Orinda, CA	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Robin M. Nebel

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/00

Date

925-227-7030

Daytime Phone #

CR2E034 (9/99)