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DOMESTIC PROFIT CORPORATION ANNUAL REPORT AS OF JANUARY 1, 2008  
CORPORATE NAME AND MAILING ADDRESS:

WM MORTGAGE REINSURANCE COMPANY, INC.  
745 FORT ST STE 800  
HONOLULU HI 96813

If the above mailing address has changed, line out and print change to the right.

If address of principal office differs from the above mailing address, state the address of principal office. Include City, State, and Zip Code:

1. AUTHORIZED SHARES (To correct line out and print the correction to the right.)	TOTAL NUMBER OF SHARES ISSUED		
CLASS	NUMBER	CLASS	NUMBER
COMMON	1,000	COMMON	1,000

2. NATURE OF BUSINESS: TO BE A CAPTIVE INSURANCE COMPANY AS DEFINED IN ARTICLE 19 OF CHAPTER 431 OF THE HAWAII REVISED STATUTES;

(To correct, line out and print corrections below. If inactive during the period, state INACTIVE.)

3. Street address of the registered office in Hawaii and the name of the registered agent at that address. (If any change, line out and print change on the right. See reverse for instructions.). After any changes made, the street addresses of its registered office and agent shall be identical.

DENYS KAZAMA  
C/O MARSH MANAGEMENT SERVICES  
745 FORT ST STE 800  
HONOLULU HI 96813

4. OFFICERS/DIRECTORS: List all officers and directors. (To correct, line out and print corrections to the right. See reverse for instructions.)

OFFICE HELD/ DIRECTOR CODE	NAME IN FULL	ADDRESS (INCLUDE CITY, STATE & ZIP CODE)	
<del>P</del>	DOMER, JACOB D	1301 SECOND AVE WMC 4001 SEATTLE WA 98101	P/D
<del>SRWS/D</del>	<del>FORMATO, CARLA A</del>	<del>17877 VON KARMAN AVE BLDG E IRVINE CA 92614</del>	
V	STRUCK, PETER	1301 SECOND AVE WMC 1405 SEATTLE WA 98101	
V	HARRISON, LESLIE A	17875 VON KARMAN AVE STE 300 IRVINE CA 92614	
V	NELSON, GREGORY J	17861 VON KARMAN AVE STE 300 IRVINE CA 92614	Bldg. E

NO CHANGES: Do not check this box if changes have been made above. (Checking this box means there are no changes reported. The Department will not be held responsible for any changes made to this report.)

C/CMI

CERTIFICATION

I certify under the penalties of Section 414-20, Hawaii Revised Statutes, that I have read the above, the information is true and correct, and I am authorized to sign this report.

DATE: 3/1/08

*Chad E. Momen*  
Signature of authorized officer, attorney-in-fact  
for an officer, or receiver or trustee  
(if the corporation is in the hands of a receiver or trustee)

Chad E. Momen, VP  
Print Name

FILE NO. 0118138D1  
Rev. 7/2007

2008 B17  
B22

File this Original  
(SEE REVERSE SIDE FOR INSTRUCTIONS)

04/02/200820644

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DOMESTIC PROFIT CORPORATION  
FILING FEE: \$ 15.00

### STATE OF HAWAII

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CORPORATE NAME: WM MORTGAGE REINSURANCE COMPANY, INC.

#### CONTINUATION OF OFFICERS/DIRECTORS

OFFICE HELD/ DIRECTOR CODE	NAME IN FULL	ADDRESS (INCLUDE CITY, STATE & ZIP CODE)	
<del>V</del>	<del>FIERLING, JENNIFER K</del>	<del>1301 SECOND AVE WMC 4001 SEATTLE WA 98101</del>	
V	MONEN, CHAD E	1301 SECOND AVE WMC 4005 SEATTLE WA 98101	WMC 1405
V	MONAHAN, CARLA J	1301 SECOND AVE WMC 1315 SEATTLE WA 98101	
T	SCHULTE, PATRICIA	1301 SECOND AVE WMC 1409 SEATTLE WA 98101	
<del>D</del>	<del>CHAPMAN, FAY L</del>	<del>1301 SECOND AVE WMC 3201 SEATTLE WA 98101</del>	
D	Longbrake, William A	1301 SECOND AVE WMC 3201 SEATTLE WA 98101	Denys S.
D	KAZAMA, DEBYS S	745 FORT ST STE 800 HONOLULU HI 96813	
D	FORTUNATO, STEPHEN	1301 SECOND AVE WMC 4001 SEATTLE WA 98101	
<del>D</del>	<del>BOYLE, HUGH F</del>	<del>1301 SECOND AVE WMC 3201 SEATTLE WA 98101</del>	
D	Mattey, Joseph P.	1301 Second Ave., WMC 1102 Seattle, WA 98101	

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