

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003846

FILED
Jan 06, 2010
Secretary of State

Entity Name: GMAC SERVICE AGREEMENT CORPORATION

Current Principal Place of Business:

300 GALLERIA OFFICENTRE, SUITE 200
MAIL CODE: 480-300-216
SOUTHFIELD, MI 48034

New Principal Place of Business:

300 GALLERIA OFFICENTRE, SUITE 200
MAIL CODE: 480-300-226
SOUTHFIELD, MI 48034

Current Mailing Address:

300 GALLERIA OFFICENTRE, SUITE 200
MAIL CODE: 480-300-216
SOUTHFIELD, MI 48034

New Mailing Address:

300 GALLERIA OFFICENTRE, SUITE 200
MAIL CODE: 480-300-226
SOUTHFIELD, MI 48034

FEI Number: 52-2106870

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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: PRES
Name: CALLAHAN, THOMAS D
Address: 300 GALLERIA OFFICENTRE, STE
City-St-Zip: SOUTHFIELD, MI 48034

Title: AS
Name: BOYCE-ECKART, KATHY
Address: 300 GALLERIA OFFICENTRE, STE 200
City-St-Zip: SOUTHFIELD, MI 48034

Title: AT
Name: HARPER, JAMES
Address: 300 GALLERIA OFFICENTRE, STE
City-St-Zip: SOUTHFIELD, MI 48034

Title: S
Name: QUENNEVILLE, CATHY L
Address: 200 RENAISSANCE CENTER
City-St-Zip: DETROIT, MI 48265

Title: T
Name: HOLTGREIVE, PAUL W
Address: 300 GALLERIA OFFICENTRE, STE
City-St-Zip: SOUTHFIELD, MI 48034

Title: AS
Name: DONNAY, ROBERT L
Address: 300 GALLERIA OFFICENTRE, STE
City-St-Zip: SOUTHFIELD, MI 48034

I hereby 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 all other like empowered.

SIGNATURE: KATHY BOYCE-ECKART

AS

01/06/2010

Electronic Signature of Signing Officer or Director

_____ Date