## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F96000003035

Entity Name: QUICKEN LOANS INC.

FILED Apr 22, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 20555 VICTOR PARKWAY LIVONIA, MI 48152 **Current Mailing Address: New Mailing Address:** 20555 VICTOR PARKWAY LIVONIA, MI 48152 FEI Number: 38-2603955 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition GILBERT, DANIEL GILBERT, DANIEL Name: Name: 20555 VICTOR PKWY, SUITE 100 20555 VICTOR PKWY Address: Address: City-St-Zip: LIVONIA, MI 48152 City-St-Zip: LIVONIA, MI 48152 SCC Title: Title: () Delete () Change () Addition Name: CHYETTE, RICHARD Name: 20555 VICTOR PARKWAY Address: Address: LIVONIA, MI 48152 City-St-Zip: City-St-Zip: Title: Title: ( ) Delete () Change () Addition BOOTH, JULIE Name: Name: 20555 VICTOR PARKWAY Address: Address: City-St-Zip: LIVONIA, MI 48152 City-St-Zip: Title: (X) Delete Title: () Change () Addition KATZMAN, DAVID Name: Name: Address: 20555 VICTOR PARKWAY, SUITE 100 Address: City-St-Zip: LIVONIA, MI 48152 City-St-Zip: Title: CEO Title: ( ) Delete () Change () Addition EMERSON, WILLIAM Name: Name: 20555 VICTOR PARKWAY Address: Address: City-St-Zip: LIVONIA, MI 48152 City-St-Zip: Title: PC00 ( ) Delete Title: () Change () Addition MCINNIS, PATRICK Name: Name: 20555 VICTOR PARKWAY Address: Address: City-St-Zip: City-St-Zip: LIVONIA, MI 48152

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICHARD CHYETTE SCC 04/22/2009