

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000005305

FILED
Apr 02, 2013
Secretary of State
CC1109184724

Entity Name: LAKEVIEW LOAN SERVICING, LLC

Current Principal Place of Business:

4425 PONCE DE LEON BLVD.
5TH FLOOR
CORAL GABLES, FL 33146

Current Mailing Address:

4425 PONCE DE LEON BLVD.
5TH FLOOR
CORAL GABLES, FL 33146 US

FEI Number: 27-4023565

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

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

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

Authorized Person(s) Detail :

Title MGRP
Name ERTEL, DAVID
Address 4425 PONCE DE LEON BLVD - 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name O'BRIEN, RICHARD
Address 4425 PONCE DE LEON BLVD 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SCFO
Name FISCHER, JOHN
Address 4425 PONCE DE LEON BLVD. 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVPS
Name BOMSTEIN, BRIAN
Address 4425 PONCE DE LEON BLVD., 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name EVENSON, BRETT
Address 4425 PONCE DE LEON BLVD., 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SVP
Name WILLIAMS, MARVIN
Address 4425 PONCE DE LEON BLVD., 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SR. VP & ASST SECRETARY
Name CARR, THOMAS F
Address 4425 PONCE DE LEON BLVD. 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SR. VP
Name WALDMAN, STUART
Address 4425 PONCE DE LEON BLVD. 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Continues on page 2

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN BOMSTEIN

SVP

04/02/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title SR. VP
Name LOMINAC, EVE
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SR. VP
Name CAMPBELL, CHRISTOPHER
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title FIRST VP & CONTROLLER
Name GLASSMAN, MARK
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name ALDECOCEA, JULIO
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name HALL, ROBERT
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title SR. VP
Name WAGOVICH, TAMMIE
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title FIRST VP
Name BRIGGS, DAVID
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name GUSS, MICHAEL B
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name FUGOK, KAREN
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
City-State-Zip: CORAL GABLES FL 33146

Title ASST VP
Name BADO, TINA
Address 4425 PONCE DE LEON BLVD.
5TH FLOOR
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