

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000003770

Entity Name: HOME POINT FINANCIAL CORPORATION**Current Principal Place of Business:**1194 OAK VALLEY DRIVE
SUITE 80
ANN ARBOR, MI 48108**Current Mailing Address:**1194 OAK VALLEY DRIVE
SUITE 80
ANN ARBOR, MI 48108**FEI Number:** 20-8921389**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Officer/Director Detail :

Title EXECUTIVE MANAGING DIRECTOR -
RETAIL LENDING
Name BRIZARD, BRIAN RANDALL
Address 1194 OAK VALLEY DRIVE
SUITE 80
City-State-Zip: ANN ARBOR MI 48108

Title DIRECTOR
Name LEVEY, STEPHEN ASHE
Address 20 HORSENECK LANE
City-State-Zip: GREENWICH CT 06830

Title PRESIDENT, CEO, AND DIRECTOR
Name NEWMAN, WILLIAM ANDREW
Address 1194 OAK VALLEY DRIVE
SUITE 80
City-State-Zip: ANN ARBOR MI 48108

Title EXECUTIVE MANAGING DIRECTOR -
FINANCE, CFO
Name NATHAN, HOWARD
Address 1194 OAK VALLEY DRIVE
SUITE 80
City-State-Zip: ANN ARBOR MI 48108

Title DIRECTOR
Name KHAN, AGHA SHUJAAT ALI
Address 20 HORSENECK LN
City-State-Zip: GREENWICH CT 06830

Title EXECUTIVE MANAGING DIRECTOR -
CAPITAL MARKETS AND STRATEGY
Name FREGOSI, MARIA NOELLE
Address 1194 OAK VALLEY DRIVE
SUITE 80
City-State-Zip: ANN ARBOR MI 48108

Title DIRECTOR
Name ROSENZWEIG, ERIC LOUIS
Address 20 HORSENECK LN
City-State-Zip: GREENWICH CT 06830

Title CHIEF ADMINISTRATION OFFICER
Name GOODMAN, MATTHEW WILLIAM
Address 1194 OAK VALLEY DRIVE
SUITE 80
City-State-Zip: ANN ARBOR MI 48108

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: WILLIAM NEWMAN

PRESIDENT

03/23/2018

Electronic Signature of Signing Officer/Director Detail

Date