

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005541

Entity Name: PHH CORPORATION**Current Principal Place of Business:**2000 MIDLANTIC DRIVE
SUITE 410-A
MOUNT LAUREL, NJ 08054**Current Mailing Address:**2000 MIDLANTIC DRIVE
SUITE 410-A
MOUNT LAUREL, NJ 08054 US**FEI Number:** 52-0551284**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	VP, TAX
Name	LYNN, KAREN M.
Address	2000 MIDLANTIC DRIVE SUITE 410-A
City-State-Zip:	MOUNT LAUREL NJ 08054

Title	DIRECTOR
Name	WADE, AARON D.
Address	2000 MIDLANTIC DRIVE SUITE 410-A
City-State-Zip:	MOUNT LAUREL NJ 08054

Title	PRESIDENT AND CHIEF EXECUTIVE OFFICER
Name	WADE, AARON D.
Address	2000 MIDLANTIC DRIVE SUITE 410-A
City-State-Zip:	MOUNT LAUREL NJ 08054

Title	ASSISTANT SECRETARY
Name	HUTTON, LEAH E.
Address	2000 MIDLANTIC DRIVE SUITE 410-A
City-State-Zip:	MOUNT LAUREL NJ 08054

Title	EXECUTIVE VICE PRESIDENT AND GENERAL COUNSEL
Name	SAMARIAS, JOSEPH J.
Address	2000 MIDLANTIC DRIVE SUITE 410-A
City-State-Zip:	MOUNT LAUREL NJ 08054

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: LEAH E. HUTTON**ASSISTANT SECRETARY** 04/02/2024_____
Electronic Signature of Signing Officer/Director Detail_____
Date