

**2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000005541

**Entity Name:** PHH CORPORATION**Current Principal Place of Business:**3000 LEADENHALL ROAD  
MT. LAUREL, NJ 08054**Current Mailing Address:**3000 LEADENHALL ROAD  
MT. LAUREL, NJ 08054**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 D  
Name MESSINA, GLEN A  
Address 3000 LEADENHALL ROAD  
City-State-Zip: MT. LAUREL NJ 08054

Title C  
Name EGAN, JAMES O  
Address 3000 LEADENHALL ROAD  
City-State-Zip: MT. LAUREL NJ 08054

Title D  
Name LOREN, ALLAN Z  
Address 3000 LEADENHALL ROAD  
City-State-Zip: MT. LAUREL NJ 08054

Title P  
Name MESSINA, GLEN A  
Address 3000 LEADENHALL ROAD  
City-State-Zip: MT. LAUREL NJ 08054

Title SVP  
Name BROWN, WILLIAM F  
Address 3000 LEADENHALL ROAD  
City-State-Zip: MT. LAUREL NJ 08054

Title DIRECTOR  
Name BOSCIA, JON A.  
Address 3000 LEADENHALL ROAD  
City-State-Zip: MT. LAUREL NJ 08054

Title DIRECTOR  
Name CARLIN, JANE D.  
Address 3000 LEADENHALL ROAD  
City-State-Zip: MT. LAUREL NJ 08054

Title DIRECTOR  
Name GIBBONS, THOMAS P.  
Address 3000 LEADENHALL ROAD  
City-State-Zip: MT. LAUREL NJ 08054

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*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 F. BROWN****SVP AND SECRETARY****04/16/2013**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                   DIRECTOR  
Name                 PARSEGHIAN, GREGORY J.  
Address             3000 LEADENHALL ROAD  
City-State-Zip:   MT. LAUREL NJ 08054

Title                   DIRECTOR  
Name                 REIF, DEBORAH M.  
Address             3000 LEADENHALL ROAD  
City-State-Zip:   MT. LAUREL NJ 08054

Title                   DIRECTOR  
Name                 PIZZI, CHARLES P.  
Address             3000 LEADENHALL ROAD  
City-State-Zip:   MT. LAUREL NJ 08054

Title                   DIRECTOR  
Name                 WETZEL, CARROLL R. JR.  
Address             3000 LEADENHALL ROAD  
City-State-Zip:   MT. LAUREL NJ 08054