## 2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address

# **DOCUMENT #823973**

Entity Name

Principal Place of Business

**SIGNATURE:** 

### **GMAC MORTGAGE CORPORATION**

00 Witmer Ro Orsham pa 1	· <del>-</del>	CORP COMPLIANCE 10 WITMER RD BOX 963 HORSHAM PA 19044-0963 US			B6020503					
2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.				DO NOT WRITE IN	N THIS SE	PACE		
City & State		City & State			4. FEI Number	23-1694840			oplied For	
Zip	Country	Zip	Country		5. Certificate of	Status Desired		8.75 Add	ditional	
<del></del>	6. Name and Address of Current F	gistered Agent			7. Name and Address of New Registered Agent					
U. Hallio allo Addisso U. Sarron (legistotta rigotta				Name						
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD			Street	Street Address (P.O. Box Number is Not Acceptable)						
PLAN	TATION FL 33324									
			City			<del>_</del>	FL	Zip Cod	e	
Q The above	named entity submits this statement for	the purpose of changing its r	ngistered office	or registered	Lagent or both	in the State of Florida		<u></u>		
6. The above	harned entity subtries this statement for	the purpose of changing its i	egistered office	or registered	agent, or both,	in the State of Florida	•		}	
	•									
SIGNATURE.	Signature, typed or printed name of registered agent as	nd title if applicable (NOTE:	Registered Agent sign	ature required wi	nen reinstating)		DATE			
Tax filing r	oration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta		\$550.00	Trust	ion Campaign Financ Fund Contribution.	ing		May Be	
11.	193V . V. W. 5 OFFICERS AND D	DIRECTORS	12.		ADDITIONS/CI	HANGES TO OFFICE	RS AND D	DIRECTOR	S (N 11	
TITLE	D	X Delete	TITLE	Da.				☐ Change	X Addition	
NAME	SHEEHAN, DENNIS W JR	<u></u>	NAME	Wâ1ke	repDavid	m <b>C.</b> I		-	_	
STREET ADDRESS	8400 NORMANDALE LAKE BLVD.		STREET ADDRESS		3044 West Grand Boulevard					
CITY-ST-ZIP	MINNEAPOLIS MN 55437	CITY-ST-ZIP						}		
TITLE	DSVP	☐ Delete	TITLE	DEVP			[	🛚 Change	☐ Addition	
NAME	APPLEGATE, DAVID MICHAEL		NAME	Apple	egate, Da	vid Michael			}	
STREET ADDRESS	100 WITMER ROAD	STRE			14 Wainut Glove Dilve					
CITY-ST-ZIP	HORSHAM PA 19044				nam, PA	<u> 19044                                     </u>				
TITLE -	DP	Defete	TITLE		- · · · · ·		[	Change	☐ Addition	
NAME	O'BRIEN, R. MICHAEL		NAME	. ]					j	
STREET ADDRESS	100 WITMER ROAD		STREET ADDRESS CITY-ST-ZIP	5						
CITY-ST-ZIP	HORSHAM PA 19044			- CITTO		<del></del>		7 01		
TITLE	SVPS	<b>™</b> Delete	TITLE NAME		VPS			Change	X Addition	
name Street address	SNYDER, GLEN W. 100 WITMER ROAD		STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·					
CITY-ST-ZIP	HORSHAM PA 19044		CITY-ST-ZIP	1 100 1	100 Witmer Road, PO Box 963 Horsham, PA 19044-0963					
TITLE	T	□ Delete	TITLE	T	iding IA	17044 0705		X Change	Addition	
NAME .	LINDSAY, ALAN R	T Delete	NAME	7 -	indsay, ∃R.⊬Alan					
STREET ADDRESS	100 WITMER ROAD	•	STREET ADDRESS		Walnut Grove Drive					
CITY-ST-ZIP	HORSHAM PA 19044		CITY-ST-ZIP		orsham, PA 19044					
TITLE	DSVP	☐ Delete	TITLE					Change	Addition	
NAME	GESS, LISA MARIE		NAME					-	1	
STREET ADDRESS	100 WITMER ROAD		STREET ADDRESS	; [					}	
CITY-ST-ZIP	HORSHAM PA 19044		CITY-ST-ZIP							

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

EQUIREROBERT H. Patterson

2E034 (9/99)

(215) 68221548

**FILED** 

Feb 14, 2000 8:00 am Secretary of State

02-14-2000 90040 042 \*\*\*150.00

<sup>1</sup>823913

### **GMAC MORTGAGE CORPORATION**

#### **DIRECTORS**

R. Michael O'Brien (215) 682-1057

David C. Walker (313) 974-1224

David Applegate (215) 682-3494

Lisa Gess (215) 682-1375 **BUSINESS ADDRESS** 

100 Witmer Road P.O. Box 963

Horsham, PA 19044-0963

3031 W. Grand Blvd. Brighton, MI 48116

4 Walnut Grove Drive Horsham, PA 19044

100 Witmer Road P.O. Box 963

Horsham, PA 19044-0963

### **OFFICERS**

R. Michael O'Brien President (215) 682-1057

David Applegate Executive Vice President (215) 682-3494

Mike Keim Chief Financial Officer (215) 682-3738

Robert H. Patterson
- Sr. V.P. & Secretary - (215) 682-1430

R. Alan Lindsay Treasurer (215) 682-3235 100 Witmer Road P.O. Box 963 Horsham, PA 19044-0963

4 Walnut Grove Drive Horsham, PA 19044

4 Walnut Grove Drive Horsham, PA 19044

100 Witmer Road
P.O. Box 963
Horsham, PA 19044-0963

4 Walnut Grove Drive Horsham, PA 19044