

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002058

FILED
Jul 14, 2004
Secretary of State

Entity Name: PHH TITLE SERVICES CORPORATION

Current Principal Place of Business:

3000 LEADENHALL ROAD, MAIL STOP LGL
MT. LAUREL, NJ 08054

New Principal Place of Business:

10 FOREST AVENUE
PARAMUS, NJ 07652

Current Mailing Address:

3000 LEADENHALL ROAD, MAIL STOP LGL
MT. LAUREL, NJ 08054

New Mailing Address:

10 FOREST AVENUE
PARAMUS, NJ 07652

FEI Number: 22-3642164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: EDWARDS, TERENCE W
Address: 3000 LEADENHALL ROAD, MAIL STOP LGL
City-St-Zip: MT. LAUREL, NJ 08054

Title: V (X) Delete
Name: HUBER, JOSEPH
Address: 1 CAMPUS DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

Title: SVP (X) Delete
Name: BROWN, WILLIAM F
Address: 3000 LEADENHALL ROAD
City-St-Zip: MT LAUREL, NJ 08054

Title: TD (X) Delete
Name: WYSHNER, DAVID B
Address: 1 CAMPUS DRIVE
City-St-Zip: PARSIPPANY, NJ 07054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVID, ACKERMAN
Address: 10 FOREST AVENUE
City-St-Zip: PARAMUS, NJ 07652

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DAVID ACKERMAN

PD

07/14/2004

Electronic Signature of Signing Officer or Director

Date