

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006116

FILED  
Mar 10, 2009  
Secretary of State

Entity Name: DEUTSCHE BANK BERKSHIRE MORTGAGE, INC.

## Current Principal Place of Business:

ONE BEACON STREET, 14TH FLOOR  
BOSTON, MA 02108 US

## New Principal Place of Business:

## Current Mailing Address:

C/O DEUTSCHE BANK, 60 WALL STREET  
NYC60-4006  
NEW YORK, NY 10005 US

## New Mailing Address:

FEI Number: 20-1511553      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: DAY, JEFFREY C  
Address: 7575 IRVINE CENTER DR, SUITE 150  
City-St-Zip: IRVINE, CA 92618 US

Title: C ( ) Delete  
Name: WENDEL, STEVEN B  
Address: ONE BEACON STREET, 14TH FL  
City-St-Zip: BOSTON, MA 02108 US

Title: S (X) Delete  
Name: OLSEN, SONJA K  
Address: 60 WALL STREET  
City-St-Zip: NEW YORK, NY 10005 US

Title: D (X) Delete  
Name: BURNS, ROBERT D  
Address: 60 WALL STREET, 10TH FL  
City-St-Zip: NEW YORK, NY 10005 US

Title: D (X) Delete  
Name: COBB, TOBIN  
Address: 60 WALL STREET, 10TH FLOOR  
City-St-Zip: NEW YORK, NY 10005 US

Title: D (X) Delete  
Name: VACCARO, JON  
Address: 60 WALL STREET, 10TH FL  
City-St-Zip: NEW YORK, NY 10005 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition  
Name: SANDRA,  
Address: 60 WALL STREET  
City-St-Zip: NYC60-4006, NY 10005 US

Title: D (X) Change ( ) Addition  
Name: ROBERT,  
Address: 60 WALL STREET  
City-St-Zip: NEW YORK, NY 10005 US

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

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 exemption stated in Chapter 119, 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: SANDRA L WEST

S

03/10/2009

Electronic Signature of Signing Officer or Director

Date