

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F11000004341

FILED
Apr 09, 2012
Secretary of State

Entity Name: SAXON MORTGAGE SERVICES, INC.

Current Principal Place of Business:

4700 MERCANTILE DR NORTH
FT WORTH, TX 76137

New Principal Place of Business:

Current Mailing Address:

4700 MERCANTILE DR NORTH
FT WORTH, TX 76137

New Mailing Address:

FEI Number: 75-1071561

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

OFFICERS AND DIRECTORS:

Title: DP
Name: STAID, STEPHEN
Address: 4700 MERCANTILE DR NORTH
City-St-Zip: FT WORTH, TX 76137

Title: D
Name: HEALAN, JAMES
Address: 4700 MERCANTILE DR NORTH
City-St-Zip: FT WORTH, TX 76137

Title: SSV
Name: CLINE, ANDREW
Address: 4700 MERCANTILE DR NORTH
City-St-Zip: FT WORTH, TX 76137

Title: TEVP
Name: SPANGLER, LARRY
Address: 4700 MERCANTILE DR NORTH
City-St-Zip: FT WORTH, TX 76137

Title: EVP
Name: ANDREWS, VERA S
Address: 4700 MERCANTILE DR NORTH
City-St-Zip: FORT WORTH, TX 76137

Title: EVP
Name: KIM, JOHN
Address: 4700 MERCANTILE DR NORTH
City-St-Zip: FORT WORTH, TX 76137

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: ANDREW CLINE

SSVP

04/09/2012

Electronic Signature of Signing Officer or Director

Date