


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2005 08:00 AM
Secretary of State

DOCUMENT # F94000005957
 1. Entity Name
 PHH FINANCIAL SERVICES, INC.



Principal Place of Business: 940 RIDGEBROOK ROAD, ATTN: LEGAL DEPARTMENT, SPARKS GLENCOE, MD 21152 US
 Mailing Address: 940 RIDGEBROOK ROAD, ATTN: LEGAL DEPARTMENT, SPARKS GLENCOE, MD 21152 US

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01102005 No Chg-P CR2E034 (10/03)

4. FEI Number: 52-1391630 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE, FL 32301

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ DATE: _____
Signature, typed or printed name of registered agent and the if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE: P NAME: HOLMES, STEPHEN P STREET ADDRESS: 1 CAMPUS DRIVE CITY-ST-ZIP: PARSIPPANY, NJ 07054	
TITLE: SD NAME: BOCK, ERIC J STREET ADDRESS: 9 WEST 57TH STREET CITY-ST-ZIP: NEW YORK, NY 10019	
TITLE: VS NAME: BUCKMAN, JAMES E STREET ADDRESS: 9 WEST 57TH STREET CITY-ST-ZIP: NEW YORK, NY 10019	
TITLE: V NAME: HUBER, JOSEPH STREET ADDRESS: 1 CAMPUS DR CITY-ST-ZIP: PARSIPPANY, NJ 07054	
TITLE: EV NAME: BUCKMAN, JAMES STREET ADDRESS: 9 WEST 57TH STREET CITY-ST-ZIP: NEW YORK, NY 10019	
TITLE: VP NAME: WEIKEL, JOSEPH W STREET ADDRESS: 904 RIDGEBROOK RD, ATTN: LEGAL DEPARTMENT CITY-ST-ZIP: SPARKS GLENCOE, MD 21152	

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 01/21/05-80003-009 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph W. Weikel Joseph W. Weikel 01/10/05 410-771-2336
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #