2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# F96000003035

Entity Name: QUICKEN LOANS INC.

Current Principal Place of Business:

20555 VICTOR PARKWAY
LIVONIA, MI 48152

New Principal Place of Business:

Current Mailing Address:

20555 VICTOR PARKWAY
LIVONIA, MI 48152

New Mailing Address:

FEI Number: 38-2603955 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
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: GILBERT, DANIEL
Address: 20555 VICTOR PKWY, SUITE 100
City-St-Zip: LIVONIA, MI 48152

Title: SCC ( ) Delete
Name: CHYETTE, RICHARD
Address: 20555 VICTOR PARKWAY
City-St-Zip: LIVONIA, MI 48152

Title: T ( ) Delete
Name: BOOTH, JULIE
Address: 20555 VICTOR PARKWAY
City-St-Zip: LIVONIA, MI 48152

Title: D ( ) Delete
Name: KATZMAN, DAVID
Address: 20555 VICTOR PARKWAY, SUITE 100
City-St-Zip: LIVONIA, MI 48152

Title: CEO ( ) Delete
Name: EMERSON, WILLIAM
Address: 20555 VICTOR PARKWAY
City-St-Zip: LIVONIA, MI 48152

Title: PCOO ( ) Delete
Name: MCINNIS, PATRICK
Address: 20555 VICTOR PARKWAY
City-St-Zip: LIVONIA, MI 48152

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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: RICHARD CHYETTE SCC 04/24/2008

Electronic Signature of Signing Officer or Director — Date