2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001363

Entity Name: SELECT PORTFOLIO SERVICING, INC.

FILED Jan 14, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
3815 S. WEST TEMPLE SAL LAKE CITY, UT 841154412				3815 S. WEST TEMPLE ATTN: CORPORATE LEGAL SAL LAKE CITY, UT 841154412			
Current Mailing Address:				New Mailing Address:			
ATTN: COF	EST TEMPLE RPORATE LEC E CITY, UT 84	GAL DEPARTMENT 1154412					
FEI Number:	87-0465626	FEI Number Applied For ()	FEI Num	nber Not Appli	icable ()	Certificate of Statu	s Desired ()
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	New Registered A	lgent:
1201 HAYS TALLAHAS	SEE, FL 3230		urpose of	f changing it	s registered c	office or registered	agent, or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ().							
		``		ADDITION	SICHANGES	TO OFFICERS A	ND DIDECTORS:
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	O'BRIEN, TIMO 3815 S. WEST			Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	MARSHALL, BR 3915 S. WEST			Title: Name: Address: City-St-Zip:	()) Change ()Addition	
Title: Name: Address: City-St-Zip:	MILLER, JASON 3815 S. WEST			Title: Name: Address: City-St-Zip:	()) Change()Addition	
Title: Name: Address: City-St-Zip:	D () KIMURA, ANDR ELEVEN MADIS NEW YORK, NY	ON AVENUE		Title: Name: Address: City-St-Zip:	,		
Title: Name: Address: City-St-Zip:	D () ONIS, CARLOS ELEVEN MADIS NEW YORK, NY			Title: Name: Address: City-St-Zip:	D (X REMMERT, JR ELEVEN MADIS NEW YORK, N	SON AVENUE	
Title: Name: Address: City-St-Zip:	D (X) REMMERT, PAT ELEVEN MADIS NEW YORK, NY	ON AVENUE		Title: Name: Address: City-St-Zip:	()) Change ()Addition	

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: JASON H MILLER S 01/14/2009