

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M99000000789

FILED
Apr 27, 2009
Secretary of State

Entity Name: PHH VEHICLE MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

940 RIDGEBROOK ROAD
ATTN: LEGAL DEPARTMENT
SPARKS GLENCOE, MD 21152

New Principal Place of Business:

Current Mailing Address:

940 RIDGEBROOK ROAD
ATTN: LEGAL DEPARTMENT
SPARKS GLENCOE, MD 21152

New Mailing Address:

FEI Number: 11-3494799

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 32301 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

MANAGING MEMBERS/MANAGERS:

Title: P () Delete
Name: KILROY, GEORGE J
Address: 940 RIDGEBROOK ROAD
City-St-Zip: SPARKS, MD 21152

Title: EVP () Delete
Name: RAUBENSTEIN, CLAIR M
Address: 940 RIDGEBROOK ROAD
City-St-Zip: SPARKS, MD 21152

Title: VAS () Delete
Name: WEIKEL, JOSEPH W
Address: 940 RIDGEBROOK ROAD, ATTN: LEGAL DEPT.
City-St-Zip: SPARKS GLENCOE, MD 21152

Title: SVC () Delete
Name: BROWN, WILLIAM F
Address: 3000 LEADENHALL ROAD
City-St-Zip: MOUNT LAUREL, NJ 07040

Title: ASV () Delete
Name: KIMBERLING, DAVID
Address: 940 RIDGEBROOK ROAD
City-St-Zip: SPARKS, MD 21152

Title: TRCS () Delete
Name: JOHNSON, MARK E
Address: 3000 LEADENHALL ROAD
City-St-Zip: MAPLEWOOD, NJ 07040

ADDITIONS/CHANGES:

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

Title: EVP (X) Change () Addition
Name: BELL, SANDRA E
Address: 940 RIDGEBROOK ROAD
City-St-Zip: SPARKS, MD 21152

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

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

Title: AS (X) Change () Addition
Name: KIMBERLING, DAVID
Address: 940 RIDGEBROOK ROAD
City-St-Zip: SPARKS, MD 21152

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSEPH W. WEIKEL

SVP

04/27/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date