

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 28, 2003 8:00 am**  
**Secretary of State**

04-28-2003 91436 038 \*\*\*150.00

DOCUMENT # *P00252*

1. Entity Name

*Fairfield Mortgage Corporation*



**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

8427 South Park Circle

3. Mailing Address

1 Campus Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

~~3B- Legal Department~~

City & State

Orlando, FL

City & State

Parsippany, NJ

4. FEI Number

71-0450393

Applied For

Not Applicable

Zip 32819

Country USA

Zip 07054

Country USA

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Corporation Service Company

Street Address (P.O. Box Number is Not Acceptable)

1201 Hays Street

City

Tallahassee

FL

Zip Code 32301

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1 Fee is \$550.00

Amended UBR is \$81.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE Director/EVP  
NAME James E. Buckman  
STREET ADDRESS 9 West 57th Street, 37th Floor  
CITY-ST-ZIP New York, NY 10019

TITLE Director/Chairman/CEO  
NAME Stephen P. Holmes  
STREET ADDRESS 1 Campus Drive  
CITY-ST-ZIP Parsippany, NJ 07054

TITLE Director  
NAME David B. Wyshner  
STREET ADDRESS 1 Campus Drive  
CITY-ST-ZIP Parsippany, NJ 07054

TITLE President  
NAME Franz S. Hanning  
STREET ADDRESS 8427 South Park Circle  
CITY-ST-ZIP Orlando, FL 32819

TITLE Vice President  
NAME Joseph Huber  
STREET ADDRESS 1 Campus Drive  
CITY-ST-ZIP Parsippany, NJ 07054

TITLE Treasurer  
NAME Duncan H. Cocroft  
STREET ADDRESS 1 Campus Drive  
CITY-ST-ZIP Parsippany, NJ 07054

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**DO NOT WRITE  
IN THIS SPACE**

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

SIGNATURE:

*Joseph Huber*

Joseph Huber, VP

4/18/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)