

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90104 036 ***150.00

DOCUMENT # P05000129521

1. Entity Name
WALTER MORTGAGE SERVICING, INC.



Principal Place of Business
**4211 W BOY SCOUT BLVD
TAMPA, FL 33607**

Mailing Address
**4211 W BOY SCOUT BLVD
TAMPA, FL 33607**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01172006 Chg-P CR2E034 (11/05)

4. FEI Number
20-3502093

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION, FL 33324**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **TROY, JOSEPH J**
STREET ADDRESS **4211 W BOY SCOUT BLVD**
CITY-ST-ZIP **TAMPA, FL 33607**

TITLE **D** ☐ Delete
NAME **KELLY, JOSEPH H JR**
STREET ADDRESS **4211 W BOY SCOUT BLVD**
CITY-ST-ZIP **TAMPA, FL 33607**

TITLE **D** ☐ Delete
NAME **DEARDEN, MILES C III**
STREET ADDRESS **4211 W BOY SCOUT BLVD**
CITY-ST-ZIP **TAMPA, FL 33607**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PDCEO** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **EVD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **EVTD** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME **S BROWN, JEANETTA**
STREET ADDRESS **4211 W Boy Scout Blvd.**
CITY-ST-ZIP **Tampa, FL 33607**

TITLE ☐ Change ☒ Addition
NAME **AT EISCH, CYNTHIA B.**
STREET ADDRESS **4211 W Boy Scout Blvd**
CITY-ST-ZIP **Tampa, FL 33607**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

WALTER MORTGAGE SERVICING, INC.

SIGNATURE: BY Cynthia B. Eisch Assistant Treasurer 2/15/2006 813-871-4066

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Cynthia B. Eisch