

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 OCT 20 PM 12:07

DOCUMENT # P07000106291 1. Entity Name ROUNDPOINT MORTGAGE SERVICING CORPORATION					
Principal Place of Business 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786			Mailing Address 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 26-1193089	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CORPDIRECT AGENTS, INC. 515 EAST PARK AVE TALLAHASSEE, FL 32301				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 _____ DATE _____ Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DEL PONTI, JOHN D JR 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP 400137359784 10/28/08--01016--005 **61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS PIERCY, TYLER 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVST	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PIERCY, TYLER 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SMITH, DAVID 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WITT, MIKE R. 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V VARGHESE, BEJI 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786		TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B 10/20/08		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ADAMS, JOHN M. 9350 CONROY WINDERMERE ROAD WINDERMERE, FL 34786	
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.					
SIGNATURE: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date 9/30/08 Daytime Phone # 707-909-9000		