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PROFIT
GORPORATION
ANNUAL REPORT
1999
DOCUMENT #1
Cendant Mortgage

FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

Amended: #61.25

FILED

DOCUMENT # DANIE						
	10			99 OCT 22 AM 8:	43	
1. Corporation Name	$\mathcal{U}$			20 CONTRACTOR OF STA	ATF	
Cendant Mortgage Corporat	tion			SECRETARY OF STALLAHASSEE, FLO	RIDA	
				IALLAMASSEE		
Principal Place of Business	Mailing Address					
Findipal Flace of Gusiness	Mailing Address			1		
3000 Leadenhall Road-LGL	3000 Leadenha1	1 Road	1-LGL			
Mt. Laurel, NJ 08054	Mt. Laurel, NJ	08054	4	DO NOT WRITE IN THIS	SPACE	<del></del>
	·			3. Date Incorporated or Qualifed		
2. Principal Place of Business	2a. Mailing Address			11-16-77 4. FEI Number	-174	-Vad Fas
21	26. Mailing Address			22-2195996	<del>  </del>	plied For t Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	
22	27			5. Certifcate of Status Desired	Fee Re	
City & State	City & State			6. Election Campaign Financing	\$5.00	May Be
23	28			Trust Fund Contribution	Added t	
Zip Country	Zip	Countr	у	8. This corporation owes the current year inta		_
24 25	<del></del>	30		Personal Property Tax.	Yes	<b>⊠</b> No
9. Name and Address of Curre	int Registered Agent	81	Name	10. Name and Address of New Registered A	vgent	
CT Corporation System			I IVANIE			
1200 South Pine Island	Road	82	Street /	Address (P.O. Box Number is Not Acceptable)		
Plantation, FL 33324	11001	8:	<del> </del>			
, , , , , , , , , , , , , , , , , , , ,			1			
		84	City	E1	85 Zip C	Code
Pursuant to the provisions of Sections 607.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig	02 and 607.1508, Florida Statute e of Florida. Such change was su ations of, Section 607.0505, Flor	es, the above thorized by ida Statute	ve named y the corpo s.	corporation submits this statement for the purpose of coration's board of directors. I hereby accept the appoint	changing its tment as reg	registered gistered
SIGNATURE Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE:	Registered Age		equired when reinstating) DATE		
SIGNATURE Signature, typed or printed name of registered ag  12. OFFICERS A	ent and title if applicable. (NOTE:	Registered Age	ent signature n	aquired when relixatefing) DATE ADDITIONS/CHANGES TO OFFICERS ANI	D DIRECTO	RS IN 12
SIGNATURE Signature, hyped or printed name of registered ag  12. OFFICERS A  IIILE Treasurer	ent and title if applicable. (NOTE:	Registered Age 13. 1.1 TITLE	int signature n	aquired when relicateding)  ADDITIONS/CHANGES TO OFFICERS AND  Treasurer		
SIGNATURE Signature, hyped or printed name of registered ag  12. OFFICERS A  IIILE Treasurer  NAME Terry Kridler	ent and title if applicable. (NOTE:	13. 1.1 TITLE 1.2 NAME	ni signature n	ADDITIONS/CHANGES TO OFFICERS AND Treasurer Duncan Cocroft	D DIRECTO	RS IN 12
SIGNATURE Signature, typed or printed name of registered ag  12. OFFICERS A  TILE Treasurer  NAME Terry Kridler  STREET ADDRESS 6 Sylvan Way	ent and 896 if applicable. (NOTE: ND DIRECTORS  X DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE	ent signature n	ADDITIONS/CHANGES TO OFFICERS AND Treasurer  Duncan Cocroft  6 Sylvan Way	D DIRECTO	RS IN 12
SIGNATURE  Signature, hyped or printed name of registered as:  12. OFFICERS A  TITLE Treasurer Terry Kridler STREET ADDRESS 6 Sylvan Way CITY-ST-ZIP Parsippany, NJ 070	IND DIRECTORS  X DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE	ent algoriture in ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AND Treasurer Duncan Cocroft	D DIRECTO	RS IN 12
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indicated on this annual report or supplemental annual 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 12 or Block 13 if shapped, or on an attachment with an address, with all other like empowered.

SIGNATURE:

William F. Brown 10-12-99

D HAME OF SHONING OFFICER OR DESCRIPTION VICE President

Senior Vice President

856-414-4152