FILED Feb 07, 2002 8:00 am Secretary of State

02-07-2002 90027 007 ***158.75

2002 UNIFORM BUSINESS REPORT (UBR)

P09486

1. Entity Name

Zip

SIGNATURE

(See criteria on back)

DOCUMENT #

CENDANT MORTGAGE CORPORATION

Principal Place of Business 3000 LEADENHALL RD., MAIL STOP LGL MT. LAUREL NJ 08054

Mailing Address

3000 LEADENHALL RD., MAIL STOP LGL MT. LAUREL NJ 08054

2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 22-2195996 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired XX

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324

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.

Signature, typed or printed name of registered agent and title if applicable. 9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so.

FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

City

(NOTE: Registered Agent signature required when reinstating)

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TD ☐ Delete TITLE ☐ Addition NAME COCROFT, DUNCAN NAME STREET ADDRESS **6 SYLVAN WAY** STREET ADDRESS CITY-ST-ZIP PARSIPPANY NJ 07054 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME **EDWARDS, TERENCE W** NAME STREET ADDRESS 3000 LEADENHALL ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MT. LAUREL NJ 08054 TITI F **VP** Delete TITLE ☐ Change ☐ Addition NAME BROWN, WILLIAM F NAME STREET ADDRESS 3000 LEADENHALL ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUREL NJ 08054 TITLE **VP** ☐ Delete TITLE ☐ Change ☐ Addition NAME GROODY, ROBERT E STREET ADDRESS 3000 LEADENHALL ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FT. LAUREL NJ 08054 TITLE ☐ Delete TITLE ☐ Change Addition NAME CASEY, DONALD J NAME STREET ADDRESS 3000 LEADENHALL ROAD STREET ADDRESS CITY-ST-ZIP FT. LAUREL NJ 08054 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered, to the best of my knowledge, information and belief.

STREET ADDRESS

CITY-ST-7IP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

William F. Brown

856<u>-917-9403</u>