2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2004 08:00 AM
Secretary of State

DOCUMENT # P27773

1. Entity Name
FIRST HORIZON HOME LOAN CORPORATION

Principal Place of Business	Mailing Address
4000 HORIZON WAY IRVING, TX 75063	9515 DEERECO ROAD SUITE 400 TIMONIUM, MD 21093

01072004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
48-0875093
☐ 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 ROAD
PLANTATION, FL 33324

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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 title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2004 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
NAME	BURKETT, CHARLES
STREET ADDRESS	165 MADISON AVENUE
CITY-ST-ZIP	MEMPHIS, TN 38103
TITLE	P
NAME	BAKER, JERRY
STREET ADDRESS	4000 HORIZON WAY
CITY-ST-ZIP	IRVING, TX 75063
TITLE	SVP
NAME	COLE, LARRY
STREET ADDRESS	165 MADISON AVENUE
CITY-ST-ZIP	MEMPHIS, TN 38103
TITLE	EVP
NAME	MAKOWIECKI, PETE
STREET ADDRESS	4000 HORIZON WAY
CITY-ST-ZIP	IRVING, TX 75063
TITLE	SVP
NAME	EDDY, BARBARA
STREET ADDRESS	4000 HORIZON WAY
CITY-ST-ZIP	IRVING, TX 75063
TITLE	Licensing Specialist/Asst. Secretary
NAME	Laura Turner
STREET ADDRESS	9515 Deereco Rd., Ste. 400
CITY-ST-ZIP	Timonium, MD 21093

U00000009677
01/21/04-80022-020 158.75

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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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Laura Turner Laura Turner 1/20/04 410-667-7022
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #