

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000001275

Entity Name: NEWREZ COMMUNITY LENDING LLC

Current Principal Place of Business:

159 CROCKER PARK BOULEVARD
4TH FLOOR, OFFICE 439
WESTLAKE, OH 44145

Current Mailing Address:

159 CROCKER PARK BOULEVARD
4TH FLOOR, OFFICE 439
WESTLAKE, OH 44145 US

FEI Number: 81-3313999

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name HARRIGAN, KEVIN
Address 159 CROCKER PARK BOULEVARD
 4TH FLOOR, OFFICE 439
City-State-Zip: WESTLAKE OH 44145

Title MANAGER
Name MCSHERRY, JOSEPH
Address 159 CROCKER PARK BOULEVARD
 4TH FLOOR, OFFICE 439
City-State-Zip: WESTLAKE OH 44145

Title MEMBER
Name NEW PENN FINANCIAL, LLC
Address 159 CROCKER PARK BOULEVARD
 4TH FLOOR, OFFICE 439
City-State-Zip: WESTLAKE OH 44145

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH MCSHERRY

MANAGER

01/25/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date