

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003273

FILED  
Jan 04, 2012  
Secretary of State

**Entity Name:** PLATINUM HOME MORTGAGE CORPORATION

**Current Principal Place of Business:**

2200 HICKS ROAD, SUITE 101  
ROLLING MEADOWS, IL 60008

**New Principal Place of Business:**

2200 HICKS ROAD  
SUITE 101  
ROLLING MEADOWS, IL 60008

**Current Mailing Address:**

2200 HICKS ROAD, SUITE 101  
ROLLING MEADOWS, IL 60008

**New Mailing Address:**

2200 HICKS ROAD  
SUITE 101  
ROLLING MEADOWS, IL 60008

**FEI Number:** 43-1653688

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: GIAMBRONE, WILLIAM W  
Address: 2200 HICKS ROAD, SUITE 101  
City-St-Zip: ROLLING MEADOWS, IL 60008

Title: DV  
Name: GIAMBRONE, MICHAEL C  
Address: 2200 HICKS ROAD, SUITE 101  
City-St-Zip: ROLLING MEADOWS, IL 60008

Title: S  
Name: PELINSKI, LORI S  
Address: 2200 HICKS ROAD, SUITE 101  
City-St-Zip: ROLLING MEADOWS, IL 60008

Title: CFO  
Name: PLENSKOFSKI, FRANCIS E  
Address: 2200 HICKS ROAD, SUITE 101  
City-St-Zip: ROLLING MEADOWS, IL 60008

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: LORI S. PELINSKI

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01/04/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date