## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000003197

Entity Name: OCWEN MORTGAGE SERVICING, INC.

**Current Principal Place of Business:** 

56 KING STREET 3RD FLOOR

CHRISTIANSTED, 00820

**Current Mailing Address:** 

**56 KING STREET** 3RD FLOOR

CHRISTIANSTED, 00820 VI

FEI Number: 66-0781479 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Apr 17, 2018

**Secretary of State** 

CC6899493126

Officer/Director Detail:

**SECRETARY** Title Title **TREASURER** 

HAYES, TIMOTHY M. BECKSTOFFER, JAY H. Name Name

Address **56 KING STREET** Address **56 KING STREET** 

> 3RD FLOOR 3RD FLOOR

CHRISTIANSTED 00820 CHRISTIANSTED 00820 City-State-Zip:

City-State-Zip:

Title **PRESIDENT** Title **DIRECTOR** 

KIM, JOHN P. BOURQUE, MICHAEL R. Name Name

**56 KING STREET** Address **56 KING STREET** Address 3RD FLOOR 3RD FLOOR

Title **DIRECTOR** 

HAYES, TIMOTHY M. Name Address

**56 KING STREET** 3RD FLOOR

CHRISTIANSTED 00820

CHRISTIANSTED 00820 City-State-Zip:

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: TIMOTHY M. HAYES

**SECRETARY** 

CHRISTIANSTED 00820

04/17/2018