

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street

Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2007

Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK * In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00

1. Corporate ID No. 135880	2. Name of Cor Equity Mo	2. Name of Corporation Equity Mortgage Services, Inc.				
3. Street Address Principal Bu 20 Walnut Street	siness Office		City	State	Zip	
4. Business Phone No. 5. State of Incorpo		Needham	MA MA	02492		
781-4555-9860 Massachuse						
5. Brief Description of the Cha Mortgage S NAMES AND ADDRI	wacter of Business Condu COUNCES / MU ESSES OF THE OFF	ted in Rhode Island +Gaye Broken CERS: ("X" BOX FOR	ATTACHMENT) [FILL IN	SPÁCES BEFORE LISING	ATTACHNERIS	
Debeth B. Gooding			Vice President Name Debeth B. Gooding			
Street Address 20 Walnut Street			Street Address 20 Walnut Street			
Needham	State MA	^{Ζφ} 02492	ମନ୍ତ Needham	State MA	^{Zip} 02492	
Secretary Name Debeth B. Gooding			Treasurer Name Debeth B. Gooding			
Street Address 20 Walnut Street City Steel			Street Address 20 Walnut Street			
Needham	State MA	7ip 02492	Gity Needham	State MA	Zip 02492	
Director Name	35E2 OF THE DIRE	CTORS: ("X" BOX FOR	ATTACHMENT) FILL II Director Name	N SPACES BEFORE USIN	G ATTACHMENTS	
Street Address			Street Address			
City	State	Zíp	Chr		2007	
Director Name			Ctty	State		
			Director Name		~	
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City	State	Zip	Сцу	State	19 21p = 1	
9. SHARES AUTHORIZI AUTHORIZED SHARES	ED ("X" BOX FOR	ATTACHMENT) 🗌 📗		("X" BOX FOR ATTACE		
Number of Sbares Class/Series Par Value			Number of Shares	CTION MUST BE COMPLETED		
20,000 Common No Par Value			5000	Class/Series Common	Par Value No Par	
This report must be exec	cuted on behalf of th	e corporation by an author	orized representative. If the c			
this report must be exec	uted on behalf of the	corporation by the recei	ever or trustee.	orporation is in the hands	s of a receiver or trust	
			Under penalty of p	erjury, I declare and affirm t	hat I have examined this	
			including any acco	ompanying schedules and sta	tements, and that all stat	
File Date			Lebel	B. Hac	La 9/7/0	
Check No. SEP	1 2 2007		Signature Debeth R. Co	noding.	Pate	
BX BY 036559 9:57			Debeth B. Gooding Print or Type Name			
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