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State of Rhode Island
and Providence Plantations
Office of the Secretary of State

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 2008

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.	2. Name of Corporation			
136301	American Home Loan Mortgage Corporation			
3. Street Address Principal Business Office		City	State	Zip
78 Cambridge Street		Burlington	MA	01803
4. Business Phone No.	5. State of Incorporation			
782-272-6700	Massachusetts			

6. Brief Description of the Character of Business Conducted in Rhode Island: Lender

7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Vice President Name
John S. Mitchell	
Street Address: 17 Ellen Road	Street Address
City: Burlington; State: MA; Zip: 01803	City; State; Zip
Secretary Name: Earl Taylor	Treasurer Name: Earl Taylor
Street Address: 123 Ashmont Street	Street Address: 123 Ashmont Street
City: Dorchester; State: MA; Zip	City: Dorchester; State: MA; Zip

8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Director Name
John S. Mitchell	Earl Taylor
Street Address: 17 Ellen Road	Street Address: 123 Ashmont Street
City: Burlington; State: MA; Zip: 01803	City: Dorchester; State: MA; Zip
Director Name	Director Name
Street Address	Street Address
City; State; Zip	City; State; Zip

9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
15,000	STK	$0.00

10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ☐

ISSUED SHARES — THIS SECTION MUST BE COMPLETED

Number of Shares	Class/Series	Par Value
100	STK	$0.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

[redacted] [redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature: [signature] Date: 3/24/08

Print or Type Name: Earl Taylor

[redacted]

Title: Treasurer

File Date: FILED
Check No.: MAR 24 2008
By: By DS 10411 7
FOR SECRETARY OF STATE USE ONLY

21549-44-245217

Form 630 Rev. 12/06