



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 2010

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. 000061637		2. Name of Corporation FIRST COLLATERAL SERVICES, INC.			
3. Street Address Principal Business Office 1000 TECHNOLOGY DRIVE			City O'FALLON	State MO	Zip 63368
4. Business Phone No. (813)604-8114		5. State of Incorporation DELAWARE			
6. Brief Description of the Character of Business Conducted in Rhode Island MORTGAGE WAREHOUSE LENDING AND ORIGINATING LOANS SECURED BY RESIDENTIAL REAL PROPERTY					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name DAVID L. WENDEL			Vice President Name LISA A. HOFFMAN		
Street Address 1000 TECHNOLOGY DRIVE			Street Address 3800 CITIGROUP CENTER DRIVE, BLDG F-1		
City O'FALLON	State MO	Zip 63368	City TAMPA	State FL	Zip 33610
Secretary Name JEFFERY L. BOYHER			Treasurer Name PAUL R. INCE		
Street Address 1000 TECHNOLOGY DRIVE			Street Address 1000 TECHNOLOGY DRIVE		
City O'FALLON	State MO	Zip 63368	City O'FALLON	State MO	Zip 63368
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name PAUL R. INCE			Director Name DAVID L. WENDEL		
Street Address 1000 TECHNOLOGY DRIVE			Street Address 1000 TECHNOLOGY DRIVE		
City O'FALLON	State MO	Zip 63368	City O'FALLON	State MO	Zip 63368
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION <u>MUST</u> BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			100,000	COMMON	1.00

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.

FILED

FEB 01 2010

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.

File Date	BY
Check No.	
By:	
FOR SECRETARY OF STATE USE ONLY	

Signature
LISA A. HOFFMAN
Print or Type Name
VP
Title