STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, *Secretary of State*

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • ***Filing Fee: $50.00***

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
113520	GMAC Mortgage Investments, Inc.			
3. Street Address Principal Business Office		City	State	Zip
3773 Howard Hughes Parkway		Las Vegas	NV	89109
4. Business Phone No.	5. State of Incorporation			6. SIC Code
215-682-4600	DELAWARE			6149

7. Brief Description of the Character of Business Conducted in Rhode Island
MORTGAGE BANKING.

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

President Name	Street Address	City	State	Zip
David M. Applegate	4 Walnut Grove Drive	Horsham	PA	19044

Vice President Name	Street Address	City	State	Zip
Michael J. Daly	100 Witmer Road P.O. Box 963	Horsham	PA	19044-0963

Secretary Name	Street Address	City	State	Zip
Robert H. Patterson	100 Witmer Road P.O. Box 963	Horsham	PA	19044-0963

Treasurer Name	Street Address	City	State	Zip
Thomas P. Stenger	4 Walnut Grove Drive	Horsham	PA	19044

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

Director Name	Street Address	City	State	Zip
David M. Applegate	4 Walnut Grove Drive	Horsham	PA	19044

Director Name	Street Address	City	State	Zip

10. SHARES AUTHORIZED ***("X" BOX FOR ATTACHMENT)*** ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000 COMM $0.01 PAR VALUE		

11. SHARES ISSUED ***("X" BOX FOR ATTACHMENT)*** ☐

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1	Common	$0.01

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted]

113520

[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.

Michael J Daly — 2/6/04
Signature of Officer — *Date*

Michael J. Daly
Print or Type Name of Officer

Vice President
Title of Officer

File Date 2.9.04
Check No. 10960536
By: MP

FOR SECRETARY OF STATE USE ONLY

[redacted]

Form 630 Rev. 12/03