

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. 7-1.2-1, subject to a penalty fee of \$25.00.	501(e), each corporation fai	ling or refusing to file its annu	ial report within thirty (30) days a	ifter the time prescribed by law (R	I.G.L. 7-1.2-1501(c&d)) is
1. Corporate ID No. 159606	2. Name of Corporation Stonegate Mortgage Associates, Inc				
3. Street Address Principal Business Office 300 Elm Street, Padanram Village		City South Dartmouth	State Massachusetts	<sup><i>Zip</i></sup> 02748	
4. Business Phone No. 5. State of Incorporation Massachusetts					
Brief Description of the Character of Mortgage Brokerage Firm	f Business Conducted in Rh	oode Island			
7. NAMES AND ADDRESSES	OF THE OFFICERS:	("X" BOX FOR ATTAC	CHMENT) 🔲 FILL IN SPA	ACES BEFORE USING AT	TACHMENTS
President Name			Vice President Name		
Thomas J. Quann III			none		
Street Address 179 Tremont Street			Street Address none		
City New Bedford	State Massachusetts	<sup>Zip</sup> 02740	City none	State none	zip none
Secretary Name Thomas J. Quann III			Treasurer Name NONE		
Street Address 179 Tremont Street			Street Address none		
City New Bedford	State Massachusetts	<sup>Ζφ</sup> 02740	<sup>City</sup> none	State none	<sup>Ζψ</sup> none
8. NAMES AND ADDRESSES	OF THE DIRECTORS	("X" BOX FOR ATT	ACHMENT) 🔲 FILL IN S	PACES BEFORE USING A	TTACHMENTS
Director Name		••	Director Name	·	201
none			none		
Street Address			Street Address		
none			none 🚾 🗯		
City	State	Zip	City	State	<b>Zb</b> ********
none	none	none	none	none	none
Director Name	<i></i>	<b>!</b>	Director Name	*******	<b>38</b> (27)
none			none SSSO		
Street Address			Street Address		
none			none 6 H		
City	State	Zip	City	State	Zip
none	none	none	none	none	none
9. SHARES AUTHORIZED		uvero diservitati alla alla contra dice	10. SHARES ISSUED	"X" BOX FOR ATTACHM	$E \stackrel{\downarrow}{N} T$ ) $\Box$
			ISSUED SHARES — THIS SECTI		• 🗓
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.			Number of Shares	Class/Series	Par Value
			3000	common	none
			none	none	none
This report must be executed this report must be executed or				poration is in the hands of	a receiver or trustee,
		•		ory, I declare and affirm that panying schedules and statem	-

File Date	FILED	M.
Check No.	JAN 19 201	2 (2.14
Ву:	-160945	- 10:16
PV FOR	SECRETARY OF STATE U	SE ONLY

including any accompanying schedules and statements, and	•
contained have in are true and correct.	1-17-12
Signature Date	
Thomas J. Quann III	
Print or Type Name	
President	
Title	