



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

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

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.

ANNUAL REPORT YEAR: 2013

1. Corporate ID No. 000098477

2. Name of Corporation Fifth Third Mortgage Company

3. Street Address Principal Business Office:

No. and Street: 38 FOUNTAIN SQUARE PLAZA
City or Town: CINCINNATI

State: OH Zip: 45263 Country: USA

4. Business Phone No.

5. State of Incorporation

State: OH

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

ORIGINATING, REFINANCING AND SERVICING OF MORTGAGE LOANS.

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	ROBERT D LEWIS	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA
TREASURER	DENNIS KLOCKE	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA
SECRETARY	THERESE M PAUL	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA
ASSISTANT SECRETARY	JAMES R HUBBARD	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA
DIRECTOR	STEVEN ALONSO	38 FOUNTAIN SQUARE PLAZA

		CINCINNATI, OH 45263 USA
DIRECTOR	THERESE M PAUL	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	750.00	750

9. 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.

Signed this 8 Day of February, 2013 at 10:50:50 AM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By JAMES R. HUBBARD
Signature of Authorized Representative of the Corporation

ASSISTANT SECRETARY
Title

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

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