

# 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.

(c&d)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2017				
1. Corporate ID No. <u>000098477</u>				
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: OI	<u>H</u> Zip: <u>45263</u> Country: <u>USA</u>			
4. Business Phone No.				
5. State of Incorporation				
State: <u>OH</u>				
ARTICLE III				
Using the following NAICS codes, please select the code that best describes your business.				

## 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.

NAICS Code

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
PRESIDENT	EDWARD ROBINSON	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA
TREASURER	SHAWN MANNS	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA

6

52

SECRETARY	KRISTINA LARESE	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA
ASSISTANT SECRETARY	MICHAEL KEEFE	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA
DIRECTOR	GLENN MEADOWS	38 FOUNTAIN SQUARE PLAZA CINCINNATI, OH 45263 USA
DIRECTOR	MARTIN MUFF	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 Number of Shares	Total Issued and Outstanding Num of Shares
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 7 Day of March, 2017 at 12:56:43 PM.** 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 MARIA ROTHER

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

© 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved