	State of Rh Office of the Se		Fee: \$50.00		
	Division Of Bu	siness Services			
	148 W. Ri				
lun f	Providence R (401) 22				
TOPE					
Limited Liability Company Annual Report					
Filing Period: September 1 - November 1					
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing					
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.					
ANNUAL REPORT YEAR: 2021					
<b>1. ID No.</b> <u>001698024</u>					
2. Exact Name of the Limited Liability Company Ocwen USVI Services, LLC					
3. State of Formation					
State: <u>FC</u>					
ARTICLE III					
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download					
the list of codes here. More information on <u>NAICS</u> can be found online.					
561440					
	of the Character of the Business	Which is Actually Conducted in F	bada laland		
4. Bher Description d	of the Character of the Business	which is Actually Conducted in F	chode Island		
BUSINESS & MAN	AGEMENT CONSULTING A	ND COLLECTION AGENCY			
BUSINESS & MANAGEMENT CONSULTING AND COLLECTION AGENCY					
5. Principal Office Ad	Idress				
No. and Street: WILLIAM D. ROEBUCK INDUSTRIAL PARK					
<u>BUILDING 1, SUITE 1-103A, ESTATE NEGRO</u> BAY					
City or Town: ST. CROIX State: VI Zip: 00850Country: USA					
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:					
Contact Name: Contact Title:					
No. and Street: <u>RR1 BOX 9907</u> City or Town: <u>KINGSHILL</u> State: <u>VI</u> Zip: <u>00850-9973</u> Country: <u>VIR</u>					
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS					
Title	Individual Name	Address			
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country		

MANAGER	DENISE O'SULLIVAN	WILLIAM D. ROEBUCK INDUSTRIAL PARK, BUILDING 1 ST. CROIX , VI 00850 USA		
MANAGER	JOSEPH J. SAMARIAS	WILLIAM D. ROEBUCK INDUSTRIAL PARK, BUILDING 1 ST. CROIX, VI 00850 USA		
<ul> <li>8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11</li> <li><u>CT CORPORATION SYSTEM</u> 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914</li> <li>9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).</li> </ul>				
signature of the indi acknowledgement of individual's act and	vidual or individuals signing th f the signatory, under penalties deed or the act and deed of the	<b>M by the authorized person.</b> This electronic his instrument constitutes the affirmation or s of perjury, that this instrument is that e company, and that the facts stated herein are liance with R.I. Gen. Laws § 7-16.		
By <u>MANDY HENI</u> Signature of Auth				
Form No. 632 Revised 09/07				
@ 0007_0004_0t-t(_D)				

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