



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR **2014**

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 000487912		2. Exact name of the limited liability company Vericrest Insurance Services, LLC			
3. State of Formation DE		4. Brief description of the character of business conducted in Rhode Island Insurance			
5. Principal office address 2711 N. Haskell Avenue, Suite 1700			City Dallas	State TX	Zip 75204
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:					
Contact Name Barbara Day			Contact Title Paralegal		
Street Address 11241 Slater Avenue, NE			City Kirkland	State WA	Zip 98033
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

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 CORPORATIONS DIV.
 2015 OCT 13 AM 10:18

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FILED
 OCT 30 2015
 By 259931
 A.A. 10:24 A.M.

File Date _____
 Check No _____
 By: _____

FOR SECRETARY OF STATE USE ONLY

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.

Signature of Authorized Person Joe Anderson Date 9/21/15

Joe Anderson, President/CEO/COB of
 Print or Type Name of Authorized Person

Caliber Home Loans, Inc., sole member