

1.) CORPORATION NAME:

**DOVENMUEHLE MORTGAGE, INC.**

DUE DATE: **9/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN AL LEN, VA**

SCC ID NO: **F0242760**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000
COMM	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 CORPORATE DRIVE  
STE 360

CITY/ST/ZIP: LAKE ZURICH, IL 60047-4982

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	WILLIAM A. MYNATT, JR.	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1 CORPORATE DRIVE STE 360		
CITY/ST/ZIP/CO:	LAKE ZURICH, IL 60047		

NAME:	DAVID ALLISON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	1 CORPORATE DR #360		
CITY/ST/ZIP/CO:	LAKE ZURICH, IL 60047		

NAME:	GLEN S BRAUN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP/CFO		
ADDRESS:	1 CORPORATE DRIVE #360		
CITY/ST/ZIP/CO:	LAKE ZURICH, IL 60047		

NAME:	ANN DUKER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1 CORPORATE DR #360		
CITY/ST/ZIP/CO:	LAKE ZURICH, IL 60047		

NAME:	MARY K PRZYBYLA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VP		
ADDRESS:	1 CORPOATE DR #360		
CITY/ST/ZIP/CO:	LAKE ZURICH, IL 60047		

NAME:	Patricia S. Ullman	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 Corporate Drive Suite 360		
CITY/ST/ZIP/CO:	Lake Zurich, IL 60047		

NAME: Michael F. Crowe TITLE: DIRECTOR ADDRESS: 238 Nottingham Avenue CITY/ST/ZIP/CO: Glenview, IL 60025	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Scott S. Rosenblum TITLE: DIRECTOR ADDRESS: 1177 Avenue Of The Americas CITY/ST/ZIP/CO: New York, NY 10036	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.		
/s/ Patricia S. Ullman SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Patricia S. Ullman, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	8/8/2013 DATE
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.		