

1.) CORPORATION NAME:

HOMEAMERICAN MORTGAGE CORPORATION

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM**
4701 COX RD STE 301
GLEN ALLEN, VA 23060

DUE DATE: **7/31/2011**

SCC ID NO: **F0485153**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 1,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
CO

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4582 S. ULSTER STREET PKWY
STE 900

CITY/ST/ZIP: DENVER, CO 80237-

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: ROBERT W HATHAWAY OFFICER DIRECTOR
TITLE: PRES/DIR
ADDRESS: 4582 S. ULSTER STREET PKWY
STE 900
CITY/ST/ZIP/CO: DENVER, CO 80237-

NAME: JOHN J HEANEY OFFICER DIRECTOR
TITLE: SR VP/TREAS
ADDRESS: 4350 S MONACO ST SUITE 500
CITY/ST/ZIP/CO: DENVER, CO 80237-

NAME: JOSEPH H FRETZ OFFICER DIRECTOR
TITLE: SECRETARY
ADDRESS: 4350 S MONACO ST SUITE 500
CITY/ST/ZIP/CO: DENVER, CO 80237-

NAME: WILLIAM B KEMPER OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 4350 S MONACO ST SUITE 500
CITY/ST/ZIP/CO: DENVER, CO 80237-

NAME: MICHAEL A. BERMAN OFFICER DIRECTOR
TITLE: DIRECTOR
ADDRESS: 4350 S. MONACO ST.
SUITE 500
CITY/ST/ZIP/CO: DENVER, CO 80237-

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| NAME: CHAD J. YETKA TITLE: DIRECTOR ADDRESS: 4350 S. MONACO ST. SUITE 500 CITY/ST/ZIP/CO: DENVER, CO 80237- | <input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR |
| NAME: CAROLINE LYNCH TITLE: VICE PRESIDENT ADDRESS: 4582 S. ULSTER ST. PKWY. SUITE 900 CITY/ST/ZIP/CO: DENVER, CO 80237- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| NAME: ROSEMARIE COMET TITLE: VICE PRESIDENT ADDRESS: 4582 S. ULSTER ST. PKWY. SUITE 900 CITY/ST/ZIP/CO: DENVER, CO 80237- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| NAME: LISA L. MCCARTY TITLE: VICE PRESIDENT ADDRESS: 4582 S. ULSTER ST. PKWY. SUITE 900 CITY/ST/ZIP/CO: DENVER, CO 80237- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| NAME: TAMMY A. SCHERMERHORN TITLE: ASST SECRETARY ADDRESS: 4582 S. ULSTER ST. PKWY. SUITE 900 CITY/ST/ZIP/CO: DENVER, CO 80237- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| NAME: MICHAEL IRA MAGER TITLE: ASST SECRETARY ADDRESS: 12220 SUNRISE VALLEY DR. CITY/ST/ZIP/CO: RESTON, VA 20191- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| NAME: L. LUDWELL JONES IV TITLE: ASST TREASURER ADDRESS: 4350 S. MONACO ST. SUITE 500 CITY/ST/ZIP/CO: DENVER, CO 80237- | <input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR |
| NAME: ANTHONY G. BERRIS TITLE: SR VP ADDRESS: 4582 S. ULSTER ST. PKWY. SUITE 900 CITY/ST/ZIP/CO: DENVER, CO 80237- | <input checked="" type="checkbox"/> OFFICER <input 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. | |
| <u>/s/ JOSEPH H FRETZ</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | <u>JOSEPH H FRETZ, SECRETARY</u> PRINTED NAME AND CORPORATE TITLE |
| <u>7/18/2011</u> 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. | |