

1.) CORPORATION NAME:

**Prudential Real Estate and Relocation Services, Inc.**

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
BANK OF AMERICA CENTER  
1111 EAST MAIN STREET, 16TH FLOOR**

SCC ID NO: **F0549891**

**RICHMOND, VA 23219**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3333 MICHELSON DRIVE  
SUITE 1000

CITY/ST/ZIP: IRVINE, CA 92612

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:	EARL W LEE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	16260 N 71ST ST		
CITY/ST/ZIP/CO:	PH2 , 10 FLOOR SCOTTSDALE, AZ 85254-1591		

NAME:	MICHAEL E WASENIUS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SEC/SVP		
ADDRESS:	2 CORPORATE DR		
CITY/ST/ZIP/CO:	00 FLOOR SHELTON, CT 06484-6238		

NAME:	Graham Badun	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	39 Wynford Drive		
CITY/ST/ZIP/CO:	Toronto, M3C3K5, CA		

NAME:	Richard Schwartz	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	907 Carriage Way		
CITY/ST/ZIP/CO:	Southlake, TX 76092		

NAME:	Thomas Hogan	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	465 South Street		
CITY/ST/ZIP/CO:	Morristown, NJ 07960		

NAME: Kevin Cash TITLE: CFO ADDRESS: 39 Wynford Drive CITY/ST/ZIP/CO: Toronto, M3C3K5, CA	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Chris Lynch TITLE: VICE PRESIDENT ADDRESS: 39 Wynford Drive CITY/ST/ZIP/CO: Toronto, M3C3K5, CA	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Lisa Fedorka TITLE: AVP ADDRESS: Two Corporate Drive Suite 440 CITY/ST/ZIP/CO: Shelton, CT 06484	<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.		
/s/ Lisa Fedorka	Lisa Fedorka, AVP	6/13/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.		