

1.) CORPORATION NAME:

DUE DATE: **6/30/2012**

**Power REO Management Services, Inc.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F1756644**

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**TX**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1525 S. Belt Line Rd.

CITY/ST/ZIP: Coppell, TX 75019

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	MARK S. ZEIDMAN	
TITLE:	EVP and CFO	
ADDRESS:	1525 S. BELT LINE ROAD	
CITY/ST/ZIP/CO:	COPPELL, TX 75019	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	Robert Behrend	
TITLE:	PRESIDENT	
ADDRESS:	1525 S. Belt Line Rd.	
CITY/ST/ZIP/CO:	COPPELL, TX 75019	

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	ROBERT L LOVE, JR.	
TITLE:	DIRECTOR	
ADDRESS:	1525 S. BELTLINE ROAD	
CITY/ST/ZIP/CO:	COPPELL, TX 75019	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ELLEN COLEMAN	
TITLE:	EXEC VP/TREAS	
ADDRESS:	1525 S. BELTLINE ROAD	
CITY/ST/ZIP/CO:	COPPELL, TX 75019	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JORDAN D DORCHUCK	
TITLE:	SECRETARY	
ADDRESS:	1525 S. BELTLINE ROAD	
CITY/ST/ZIP/CO:	COPPELL, TX 75019	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	KIMBERLY J. DAY	
TITLE:	ASST SECRETARY	
ADDRESS:	1525 S. BELT LINE ROAD	
CITY/ST/ZIP/CO:	COPPELL, TX 75019	

NAME: KRISTEN THOMAS TITLE: ASST SECRETARY ADDRESS: 1525 S. BELT LINE ROAD CITY/ST/ZIP/CO: COPPELL, TX 75019	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: DAVID M APPLGATE TITLE: DIRECTOR ADDRESS: 1525 S. BELTLINE ROAD CITY/ST/ZIP/CO: COPPELL, TX 75019	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
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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/ KIMBERLY J. DAY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	KIMBERLY J. DAY, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	5/30/2012 DATE
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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.