

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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May 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P12913 (0)
1. Corporation Name
ACCUBANC MORTGAGE CORPORATION

Principal Place of Business
12377 MERIT DR #800
P O BOX 809089
DALLAS TX 75380

Mailing Address
12377 MERIT DR #800
P O BOX 809089
DALLAS TX 75380-8089



3. Date Incorporated or Qualified 01/15/1987
3a. Date of Last Report 05/01/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 75-1831365	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
23 Zip Country	28 Zip Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
24	25	29	30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DEVP	1.1 TITLE	☐ Change ☐ Addition
NAME	HICKMAN, KENNETH G	1.2 NAME	
STREET ADDRESS	5713 WILLOWBROOK	1.3 STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75251	1.4 CITY - ST - ZIP	
TITLE	DCEO	2.1 TITLE	☐ Change ☐ Addition
NAME	STARKEY, WILLIAM R.	2.2 NAME	
STREET ADDRESS	5713 WILLOWBROOK	2.3 STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75251	2.4 CITY - ST - ZIP	
TITLE	DPP	3.1 TITLE	☐ Change ☐ Addition
NAME	MUNFORD, JAMES K	3.2 NAME	
STREET ADDRESS	12377 MEIRT, SUITE 600	3.3 STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75251	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	☐ Change ☐ Addition
NAME	RIEDY, MARK J	4.2 NAME	
STREET ADDRESS	12377 MERIT, SUITE 600	4.3 STREET ADDRESS	
CITY - ST - ZIP	DALLAS TX 75251	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	WEINSTEIN, BERNARD L.	5.2 NAME	
STREET ADDRESS	AVENUE C AT CHESTNUT-UNIV. OF N. TEXAS	5.3 STREET ADDRESS	
CITY - ST - ZIP	DENTON TX 76203	5.4 CITY - ST - ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	GARCIA, RUDOLFO	6.2 NAME	
STREET ADDRESS	98 HOLLYMEAD	6.3 STREET ADDRESS	
CITY - ST - ZIP	THE WOODLAND TX 77381	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97

Date

972-982-7314

Daytime Phone #

CR2E034 (9/96)