

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P12913

1. Corporation Name

ACCUBANC MORTGAGE CORPORATION

Principal Place of Business

12377 MERIT DR #600
P O BOX 809089
DALLAS TX 75380

Mailing Address

12377 MERIT DR #600
P O BOX 809089
DALLAS TX 75380

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90112 017 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/15/1987

4. FEI Number

75-1831365

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

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

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

TITLE ☐ DELETE
NAME **DEVP**
STREET ADDRESS **HICKMAN, KENNETH G**
CITY-ST-ZIP **12377 MERIT DR, #600**
DALLAS TX 75251

TITLE ☐ DELETE
NAME **DCEO**
STREET ADDRESS **STARKEY, WILLIAM R**
CITY-ST-ZIP **12377 MERIT DR, #600**
DALLAS TX 75251

TITLE ☒ DELETE
NAME **DPP**
STREET ADDRESS **MUNFORD, JAMES K**
CITY-ST-ZIP **12377 MERIT, SUITE 600**
DALLAS TX 75251

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **RIEDY, MARK J**
CITY-ST-ZIP **12377 MERIT, SUITE 600**
DALLAS TX 75251

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **WEINSTEIN, BERNARD L.**
CITY-ST-ZIP **AVENUE C AT CHESTNUT-UNIV. OF N. TEXAS**
DENTON TX 76203

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **GARCIA, RUDOLFO**
CITY-ST-ZIP **98 HOLLYMEAD**
THE WOODLAND TX 77381

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME **D**
1.3 STREET ADDRESS **James B. Gardner**
1.4 CITY-ST-ZIP **1700 Pacific Avenue, #1400**
Dallas, TX 75201

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kenneth Hickman, Ex. Vice President 3/18/99

Date

Daytime Phone #

(972) 982-7000

CR2E034 (1/98)