

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

**FILED**  
**May 05, 1999 8:00 am**  
**Secretary of State**

05-05-1999 90091 017 \*\*\*158.75

**DOCUMENT # 538250**

1. Corporation Name

AMERICA'S MORTGAGE SERVICING, INC.

Principal Place of Business

1201 WEST PEACHTREE STREET N.E.  
9TH FLOOR  
ATLANTA GA 30309-3415  
US

Mailing Address

1201 WEST PEACHTREE STREET N.E.  
9TH FLOOR  
ATLANTA GA 30309-3415  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/29/1977

4. FEI Number

59-1755531

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 1910 PACIFIC AVE., 16th fl 26 1910 PACIFIC AVE., 16th fl  
Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State

23 Dallas, Texas

Zip Country

24 75201 25 US

City & State

28 Dallas, Texas

Zip Country

29 75201 30 US

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
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	DP	<input type="checkbox"/> DELETE
NAME	HAMMETT, JAMES	
STREET ADDRESS	1910 PACIFIC AVENUE, 16TH FLOOR	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	D	<input type="checkbox"/> DELETE
NAME	BELL, DANIEL M.	
STREET ADDRESS	1910 PACIFIC AVENUE, 16TH FLOOR	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	DVP	<input checked="" type="checkbox"/> DELETE
NAME	SCHUG, JOHN	
STREET ADDRESS	1910 PACIFIC AVENUE, 16TH FLOOR	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	KELLEY, SHARON	
STREET ADDRESS	1910 PACIFIC AVENUE, 16TH FLOOR	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	APPLEBY, NANCY	
STREET ADDRESS	1910 PACIFIC AVENUE, 16TH FLOOR	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	VP	<input type="checkbox"/> DELETE
NAME	VORDTRIEDE, JOHN	
STREET ADDRESS	1910 PACIFIC AVENUE, 16TH FLOOR	
CITY-ST-ZIP	DALLAS TX 75201	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	DVP
3.3 STREET ADDRESS	SIMS, PHILIP B.
3.4 CITY-ST-ZIP	1910 PACIFIC AVENUE, 16TH FLOOR DALLAS, TX 75201
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	VP
4.3 STREET ADDRESS	BUSH, JR., JOSEPH F.
4.4 CITY-ST-ZIP	1910 PACIFIC AVENUE, 16TH FLOOR DALLAS, TX 75201
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

(SEE ATTACHED PAGE)

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/99

Date

(972) 761-8041

Daytime Phone #

CR2E034 (11/98)

(CONTINUATION PAGE)

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538250

**1999 PROFIT CORPORATION ANNUAL REPORT**

**AMERICA'S MORTGAGE SERVICING, INC.  
1910 PACIFIC AVENUE, 16<sup>TH</sup> FLOOR  
DALLAS, TX 75201**

**Title: ST  
Name: Fisher, John  
Address: 1910 Pacific Avenue, 16<sup>th</sup> floor  
Dallas, TX 75201**