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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secret∉ry of State

DIVISION OF CORPORATIONS

DOCUMENT # 822526

Corpora ion Name

Principal Place of Business

ASSOCIATES HOME EQUITY SERVICES, INC.

250 CARPENTER FREEWAY CORP. TAX DEPT IRVING TX 75062 US		P.O. BOX 660237 N/A CORP. TAX DEPT DALLAS TX 75266-0237 US				3	DO NOT WRITE IN THIS SPACE 3. Date ir corporated or Qualifed 03/19/1969							
2. Principal F	Place of Business	2a. Mailing Address				4	FEIN				Apr	ied For		
26							06-1104540				Not	Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5		ate of Status De	sired 🗆		. 75 A ee Rec	dditional quired		
City & Sa	te	City & State				6	Election	า Campaign Fin	ancing [\$	5.00 r	\tay Be		
23		28					Trust	Fund Contributio	ı	A	dded to	Fees		
Zip	Country	Zip	Cour	try		8	. This c	crporation owes	the current year!	ntangibl				
24		29	30				1 Cracinar Froperty Tax					[]No		
	9. Name and Address of Currer	nt Registered Agent				10	Name	and Address of	f New Registere	d Agent				
				81	Name									
THE PRENTICE-HALL CORPORATION SYSTEM INC.				82	Street /	Street Address (P.O. Box Number is Not Acceptable)								
1201 HAYS STREET						,								
	TE 105			83										
TALLAHASSEE FL 32301				84	City							85 Zip Code		
				U-7	City				F	L				
l office or i	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations are sent to the obligations of the sent the obligations are sent to the obligations of the sent the obligations are sent to the obligations of the sent the obligations are sent to the obligations of the sent the s	of Florida. Such change was a	authorized	by I	the corpo	corporation oration's b	n subm oard of	its this statemen cirectors. I heret	for the purpose by accept the app	of chang ointmen	ing its i t as reg	r agistered g-stered		
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable (NOT	Registered /	\gen	t signature re	equ red when			DATE					
12.	OFFICERS AN	NE DIRECTORS /	13.				ADDIT	ONS/CHANGES	TO OFFICERS					
TITLE	DP	☑ DELETE	1,1 TIT	E.		. .		5	1	[NC	hange	Addition		
NAME	FOWLER, DANIEL IT		1.2 NA	Æ		1205	cn,	zeborah	L					
STREET ADDRE IS	TADDRE IS 250 CARPENTER FREEWAY		1.3 STF	1.3 STREET ADDRESS										
CITY-ST-ZIP	IRVING TX		1.4 CIT	Y-ST	r-ZIP									
TITLE	VPT	☐ DELETE	2.1 TITI	E.						□c	hange	Addition		
NAME	HUGHES, JOHN		2.2 NAI	ΛE										
STREET ADDRESS			2.3 STF	REET	ADDRESS									
CITY-ST-ZIP	IRVING TX	/	2. 4 CIT	Y- S	T-ZIP									
TITLE	S	☐ DELETE	3 1 TIT	.E						☑c	hange	Addition Addition		
NAME	HAYES, TIMOTHY		3.2 NA	Æ	Į	1-154	ەس,	firederic	٥-					
STREET ADDRE 35			3.3 STF	REET	ADDRESS		•							
CITY-ST-ZIP	IRVING TX		34 CIT	Y-S	T-ZIP									
TITLE	AVS	☐ DELETE	4.1 TIT	.E					<u> </u>		hange	Addition		

14. I hereby certify that the information supplied with this filling 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 Change 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 bindwieter.

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4.3 STREET ADDRESS

5.3 STREET ADDRESS

6 3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

62 NAME

TY DELETE

DELETE

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

GREENE, PATRICK

GOSS, GAVAN P:

IRVING TX

IRVING TX

₽ D

250 CARPENTER FREEWAY

250 CARPENTER FREEWAY

250 CARPENTER FREEWAY

MARSHALL, HAROLD-D

NATI ITE AND TYPED OR FRINTED NAME OF SIGNING OFFICE! OF E

ASS'T VICE PRESIDENT

& ASS'T SECRETARY

SIGNING OFFICER OR DIRECTOR

sletten michael w.

Nichols R. Stephen

4/19/90

Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90017 040 ***150.00

Daytime Phone #

CR2F034 (11/98

☐ Addition

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