

FILE ON OR BEFORE DECEMBER 31, 1997 OR PARTNERSHIP WILL BE SUBJECT  
TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP  
ANNUAL REPORT  
1998



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

FILED

98 MAR -9 AM 10:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

1. Name of Limited Partnership

1a. DOCUMENT #  
B95000000084

AMERICAN PRIORITY MORTGAGE COMPANY, LIMITED PART  
NERSHIP

48-AR  
CM



Mailing Address

Principal Office Address

1300 POST OAK BLVD., SUITE 1000  
HOUSTON TX 77056

350 N. ST. PAUL, SUITE 2900  
DALLAS TX 75201

3. Date Formed or Registered

03/10/1995

5a. Capital Contributions as  
Shown on record.

\$0.00

3a. Date of Last Report

12/26/1996

5b. Amount of Capital  
Contributions in FLORIDA  
to date.

\$1,721

4. State or Country of Formation

TX

6. FEI Number

75-2537741

☐ Applied For  
☐ Not Applicable

7. Certificate of Status Desired



\$8.75 Additional  
Fee Required

8. Make check payable to: Dept. of State (See reverse side for fee information)

2. Mailing Address

P.O. BOX 199000  
Suite, Apt. #, etc.

2a. Principal Office Address

2728 N. HARWOOD  
Suite, Apt. #, etc.

City & State

DALLAS, TEXAS

City & State

DALLAS, TEXAS

Zip

Country

75219

Zip

Country

75201

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. If changed, new Registered Agent/Office SEE STATEMENT

Name

CORPORATION SERVICE COMPANY

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

1201 HAYES STREET

Suite, Apt. #, etc.

City

TALLAHASSEE

FL

Zip Code

32301

10a. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, 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 its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

FF \$141.25

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY  
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

11a. Address of Each General Partner  
(Do NOT Use Post Office Box Numbers)

11b. City, State & Zip Code

11c. Registration/  
Document Number

CTX MORTGAGE VENTURES CORP

2728 N. HARWOOD

DALLAS TX 75201

F95000001162

900002453109--8  
-03/10/88--01101--007  
\*\*\*\*141.25 \*\*\*\*141.25

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

DATE

12/20/97

RICHARD C. HARVEY, ASSIST. VICE PRESIDENT-CTX MORTGAGE VENTURES CORP.

Typed or Printed Name of General Partner Signing Form

Daytime Telephone Number

(214) 981-5000

CR2E003 (6/97)