FILED May 12, 2002 8:00 am Secretary of State

05-12-2002 90613 022 ***150.00

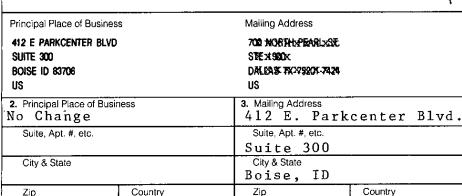
2002 UNIFORM BUSINESS REPORT (UBB)

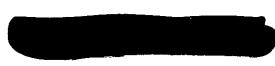
DOCUMENT #

1. Entity Name

F93000005679

AMRESCO COMMERCIAL FINANCE, INC.





No Change			412 E. Parkcenter Blvd.									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE						
			Suite 300									
City & State			City & State Boise, ID			00.0400547				pplied For		
										lot Applicable		
Zip		Country Zip 8 3 7 0 6			5. Certificate of Status Desired			esired	S8.75 Additional Fee Required			
	7. Name and Address of New Registered Agent											
				Name					·			
CT CORP	Ctront Address /B.O. Boy Number in Not Assessable)											
1200 S. P	Street Address (P.O. Box Number is Not Acceptable)											
						••••						
PLANTATI	,											
					City FL Zip Code							
8. The above	e named entity	submits this statement for t	the purpose of changing its re	egisterea onice	or registere	eo agent,	or both, in the Sta	ite oi Fiori	ioa.		į	
SIGNATURE.		printed name of registered agent an	AUTE A STATE AUTE	0			V==\		DATE		 i	
	Signature, typed or	printed name of registered agent an	ditte if applicable. (NOTE:	Registered Agent sign	ature required	when reinstat	ung)		DATE			
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! I					EE IS \$150.00 10. Election Campaign Financing \$5.00 May Be							
Tax filing requirement and elects to do so.			After May 1, 2002 Fee will be \$550.00			- 1	Trust Fund Co	•			d to Fees	
(See criter	ria on back)		Make Check Payable	e to Departme	nt of Stat	te						
11.	12.	12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11										
TITLE	Р		☐ Delete	TITLE	D					Change	Addition	
NAME	BROWN, R	andolph e		NAME	Lanc	nce West						
STREET ADDRESS 700 N PEARL STE. 1900				STREET ADDRESS	1301	1301 Avenue of the Americas						
CITY-ST-ZIP	DALLAS TX	75201***		CITY-ST-ZIP		New York, NY 10019						
TITLE	v		☐ Delete	TITLE						☐ Change	☐ Addition	
NAME	COLE, WILI	IAM C		NAME							ì	
STREET ADDRESS												
CITY-ST-ZIP	BOISE ID 8			CITY-ST-ZIP								
TITLE	VSD			TITLE	s ?	£ , ·	·			☐ Change	X Addition	
NAME	BLACKWEL	I KEITH I		NAME	Cra	ig Ch	nristens		•		ļ	
STREET ADDRESS		RL STE 1900		STREET ADDRESS			Parkcent		lvd.	Ste	300	
CITY-ST-ZIP		75201-7424		CITY-ST-ZIP			ID 83770		•	•	}	
TITLE	VCAO		☑ Delete	TITLÉ	LT.FE	> 1 E-1				☐ Change	X Addition	
NAME		RONALD B	24/4/4	NAME			Pettee	•	-	-	ĺ	
STREET ADDRESS		RL ST SUITE 1900		STREET ADDRESS			Pearl St		1900			
CITY-ST-ZIP		75201-7424		CITY-ST-ZIP			TX 752					
TITLE			□ Delete	TITLE				<u>~ </u>		☐ Change	X Addition	
NAME				NAME			iger					
STREET ADDRESS				STREET ADDRESS			enue of	the	Ameri	ícas		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITI F

NAME

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

10019

1301 Avenue of the Americas

NY

New York, NY 10019

Randy Nardone

New_York

Daytime Phone #

□ Change