

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000002110

FILED  
Apr 12, 2007  
Secretary of State

Entity Name: ALLIED HOME MORTGAGE CAPITAL CORPORATION

## Current Principal Place of Business:

6110 PINEMONT  
#215  
HOUSTON, TX 77092 US

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 924527  
HOUSTON, TX 772924527 US

## New Mailing Address:

FEI Number: 76-0340141

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND RD  
PLANTATION, FL 33324 US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HODGE, JIM C  
Address: 60 QUEEN STREET  
City-St-Zip: FREDERIKSTED, VI 00840

Title: S ( ) Delete  
Name: TAYLOR, MICHELE  
Address: 6110 PINEMONT #215  
City-St-Zip: HOUSTON, TX 77092

Title: EVP ( ) Delete  
Name: SEACH, JEANNE  
Address: 6110 PINEMONT DR #215  
City-St-Zip: HOUSTON, TX 770923216

Title: VP ( ) Delete  
Name: CLAPSADDLE, DON  
Address: 6110 PINEMONT DRIVE, SUITE 215  
City-St-Zip: HOUSTON, TX 77092

Title: T ( ) Delete  
Name: TAYLOR, MICHELE  
Address: 6110 PINEMONT DRIVE, SUITE 215  
City-St-Zip: HOUSTON, TX 77092

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: HODGE, JIM C  
Address: 6110 PINEMONT #215  
City-St-Zip: HOUSTON, TX 77092

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: EVP (X) Change ( ) Addition  
Name: STELL, JEANNE  
Address: 6110 PINEMONT DR #215  
City-St-Zip: HOUSTON, TX 770923216

Title: VP (X) Change ( ) Addition  
Name: HAGEN, JAMES L  
Address: 6110 PINEMONT DRIVE, SUITE 215  
City-St-Zip: HOUSTON, TX 77092

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JIM C. HODGE

PD

04/12/2007

Electronic Signature of Signing Officer or Director

Date