

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

FILED

Mar 03 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # F94000006263 (7)

1. Corporation Name
AMRESCO MANAGEMENT, INC.

Principal Place of Business
700 N. PEARL STE. 2400
PLAZA OF THE AMERICAS, LOCK BOX #342
DALLAS TX 75201

Mailing Address
700 N. PEARL STE. 2400
PLAZA OF THE AMERICAS, LOCK BOX #342
DALLAS TX 75201-2832



3. Date Incorporated or Qualified 12/08/1994	3a. Date of Last Report 05/01/1996
4. FEI Number 75-2149936	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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21. State, Apt. #, etc.	26. State, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent
CT 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. City	
84. City	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 type the printed name of registered agent and the P.O. address)

(NOTE: Registered Agent signature required when reinstating)

DATE

1/20/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCEO	1.1 TITLE	
NAME	LUTZ, ROBERT H JR	1.2 NAME	
STREET ADDRESS	1845 WOODALL RODGERS FRWY., #1700	1.3 STREET ADDRESS	700 N. Pearl, Suite 2400
CITY-ST-ZIP	DALLAS TX 75201	1.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	PD	2.1 TITLE	
NAME	ADAIR, ROBERT L III	2.2 NAME	
STREET ADDRESS	1845 WOODALL RODGERS FRWY., #1700	2.3 STREET ADDRESS	700 N. Pearl, Suite 2400
CITY-ST-ZIP	DALLAS TX 75201	2.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	VTD	3.1 TITLE	
NAME	EDWARDS, BARRY L	3.2 NAME	
STREET ADDRESS	1845 WOODALL RODGERS FRWY., #1700	3.3 STREET ADDRESS	700 N. Pearl, Suite 2400
CITY-ST-ZIP	DALLAS TX 75201	3.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	V	4.1 TITLE	
NAME	CAPPELLINO, DEBRA S	4.2 NAME	
STREET ADDRESS	1845 WOODALL RODGERS FRWY., #1700	4.3 STREET ADDRESS	700 N. Pearl, Suite 2400
CITY-ST-ZIP	DALLAS TX 75201	4.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 included 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 Book 12 or Book 13, changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/97

214/953-7810

CR2E034 (9/96)