

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

FILED
May 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F95000001158 (3)

1. Corporation Name

~~NOVA CREDIT CORPORATION~~

CENTEX CREDIT CORPORATION

Principal Place of Business

Mailing Address

3333 LEE PKY.
DALLAS TX 75219

PO BOX 199000
DALLAS TX 75219
US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	3a. Date of Last Report
21 2728 N HARWOOD ST		26 P.O. BOX 199000		03/10/1995	05/01/1996
22 Suite, Apt #, etc		27 Suite, Apt #, etc		4. FEI Number	Applied For
23 City & State		28 City & State		75-2570063	Not Applicable
24 Zip		29 Zip		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Country		Country		6. Election Campaign Financing	\$5.00 May Be Added to Fees
75201		75219		Trust Fund Contribution	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION FL 33324

81 Name

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

83

84 City

FL

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, RICHARD K	1.2 NAME	BARONE, ANTHONY H.
STREET ADDRESS	5800 S. QUEBEC	1.3 STREET ADDRESS	2728 N HARWOOD ST
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80111	1.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	VT <input type="checkbox"/> DELETE	2.1 TITLE	V/T/S <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAROTHERS, RICK J	2.2 NAME	
STREET ADDRESS	3333 LEE PKY.	2.3 STREET ADDRESS	2728 N HARWOOD ST
CITY-ST-ZIP	DALLAS TX 75219	2.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	AS <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMERGE, RAYMOND G	3.2 NAME	
STREET ADDRESS	3333 LEE PKY.	3.3 STREET ADDRESS	2728 N HARWOOD ST
CITY-ST-ZIP	DALLAS TX	3.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	AV <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARVEY, RICHARD C	4.2 NAME	
STREET ADDRESS	3333 LEE PKY.	4.3 STREET ADDRESS	2728 N HARWOOD ST
CITY-ST-ZIP	DALLAS TX 75219	4.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	AV <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MASON, JEFF A	5.2 NAME	
STREET ADDRESS	3333 LEE PKY.	5.3 STREET ADDRESS	2728 N HARWOOD ST
CITY-ST-ZIP	DALLAS TX 75219	5.4 CITY-ST-ZIP	DALLAS, TX 75201
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 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 Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/97

Date

(214) 981-5000

Daytime Phone #

0528066

CR2E034 (9/96)

CORPORATION:

CENTEX CREDIT CORPORATION

FORMER CORPORATE NAMES:

Nova Credit Corporation
Nova Mortgage Credit Corporation

FEIN:

75-2570083

The address of all officers and directors listed below is:
2728 N. Harwood St.
Dallas, TX 75201

**MAILING ADDRESS
P O BOX 199000
DALLAS, TEXAS 75219**

DIRECTORS:

Anthony H. Barone
Carl N. Hearne*

OFFICERS:

Chairman of the Board
President and Chief Executive Officer
Executive Vice President
Vice President, Treasurer and Secretary
Vice President-Operations
Vice President-Underwriting
Vice President, General Counsel and Assistant Secretary
Assistant Vice President and Assistant Secretary
Assistant Vice President
Assistant Vice President
Assistant Vice President and Assistant Secretary
Assistant Vice President and Assistant Secretary
Assistant Treasurer
Assistant Secretary and Document Signer
Assistant Secretary and Document Signer
Assistant Secretary
Assistant Secretary
Assistant Secretary
Document Signer
Document Signer
Document Signer
Document Signer
Document Signer

Carl N. Hearne
Anthony H. Barone
Stephen Janawsky
Rick J. Carothers
Margaret A. Hauser
Allan E. Bothwell
Donald R. Westfall
Teresa Baldwin
Richard C. Harvey
Jeff A. Mason
Donna White
Kim Yowell
Belinda R. DeArman
Nancy A. Levitz
Amzie Grant
James H. Graass
Dana M. Mancill
Raymond G. Smerge
Diane Bainbridge
Linda Enright
Sue Smith
John Ward
Denise Vigil

NOVA CREDIT CORPORATION

2728 NORTH HARWOOD STREET

DALLAS, TEXAS 75201

April 23, 1997

Florida Secretary of State
PO Box 1500
Tallahassee FL 32302-1500

Gentlemen:

Enclosed are the following return(s):

Return: FL Annual Report

Period: FYE 3/31/1997

Payment: \$ 165.00

Check Number: 2269

Very truly yours,


Enclosures

U.S. POSTAL SERVICE CERTIFICATE OF MAILING		TAX DEPT: NJP
Received From: NOVA CREDIT CORPORATION		Affix postage and postmark. Inquire of Postmaster for postage
P.O. BOX 199000		
DALLAS, TEXAS 75219		
One piece of ordinary mail addressed to:		
Florida Secretary of State		
PO Box 1500		
Tallahassee FL 32302-1500		
MAY BE USED FOR DOMESTIC AND INTERNATIONAL MAIL, DOES NOT PROVIDE FOR INSURANCE -POSTMASTER		
PS FORM 3817 MAY 1976		*U.S. GOVERNMENT PRINTING OFFICE: 1979-752-524

MAILING ADDRESS: P.O. BOX 199000 DALLAS, TEXAS 75219