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Apr 14, 1999 8:00 am  
Secretary of State

04-14-1999 90046 019 \*\*\*150.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000001162

1. Corporation Name

CTX MORTGAGE VENTURES CORPORATION

Principal Place of Business

2728 N HARWOOD ST  
DALLAS TX 75201  
US

Mailing Address

PO BOX 199000  
DALLAS TX 75219  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/10/1995

4. FEI Number

75-2178087

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 owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALL. FL 32301

10. Name and Address of New Registered Agent

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

TITLE ☐ DELETE

NAME S  
STREET ADDRESS SMERGE, RAYMOND G  
CITY-ST-ZIP 2728 N HARWOOD ST  
DALLAS TX 75201

TITLE ☐ DELETE

NAME T  
STREET ADDRESS ROBERTS, VICKI A  
CITY-ST-ZIP 2728 N HARWOOD ST  
DALLAS TX 75201

TITLE ☐ DELETE

NAME PD  
STREET ADDRESS CROOM, JUDSON H  
CITY-ST-ZIP 2728 NORTH HARWOOD ST  
DALLAS TX 75201

TITLE ☒ DELETE

NAME V  
STREET ADDRESS MEYER, MARK L  
CITY-ST-ZIP 3000 FOUNDERS BLVD #239  
OKLAHOMA CITY OK 73112

TITLE ☐ DELETE

NAME V  
STREET ADDRESS ERICKSON, JANET L  
CITY-ST-ZIP 2728 N HARWOOD ST  
DALLAS TX 75201

TITLE ☐ DELETE

NAME AVP  
STREET ADDRESS HARVEY, RICHARD C  
CITY-ST-ZIP 2728 N HARWOOD ST  
DALLAS TX 75201

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☒ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/6/99

(214) 981-5000

0542441