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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **F9600000903**1. Corporation Name

AMRESCO FINANCIAL I, INC.

Principal Place of Business Mailing Address						
700 N PEARL 700 N. PEARL						
STE 2400	_	STE 2400				DO NOT WRITE IN THIS SPACE
DALLAS TX 752	01	DALLAS TX 75201 US				3. Date Incorporated or Qualifed
US US						02/22/1996
2 Deignaland Di	ace of Business	2a. Mailing Address				4. FEI Number Applied For
⊢ ′	ace of business	} 1				75-2607940 Not Applicable
21 Cuita Ant	4 -1-	Suite, Apt. #, etc.				\$8.75 Additional
Suite, Apt.	#, etc.	27				5. Certificate of Status Desired Fee Required
City & State		City & State				6 Election Compaign Financing \$5.00 May Pa
23		28			Trust Fund Contribution Added to Fees	
Zip Country		Zip Country				8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax.
[24]	9. Name and Address of Current		301	<u></u>		10. Name and Address of New Registered Agent
5. Isaine and Address of Current Registered Agent				81	Name	
C T CORPORATION SYSTEM				Щ		No. 1 and 1
	SOUTH PINE ISLAND ROAD	82 Street Ad		Street A	Address (P.O. Box Number is Not Acceptable)	
	ITATION FL 33324	83				
	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•				
<u> </u>				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						
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 rev					equired when reinstating) DATE	
12. OFFICERS AND DIRECTORS			13.	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	CCEO	XX DELETE	1.1 Π	TLE		DP Change Addition
NAME	LUTZ, ROBERT H JR		1.2 N	AME		DEBRA' CAPPELINO
STREET ADDRESS	·		1.3 81	TREET	ADDRESS	2 CORPORATE PARK, STE 100
CITY-ST-ZIP	DALLAS TX	•	1.4 CITY-S		r-ZiP	IRVINE, CA 92606
TITLE	DP	(DELETE	2.1 TY			DVT Change XXAddition
NAME	ADAIR, ROBERT L III		2.2 NAME		ì	LEONARD A. CROSBY
STREET ADDRESS	700 N. PEARL, STE 2400		23.81	2.3 STREET		2 CORPORATE PARK, STE 100
CITY-ST-ZIP	DALLAS TX	The state of the s				IRVINE, CA 92606
TITLE	DCFO	(X) DELETE	3.1 TITLE			DS Change XXAddition
NAME	EDWARDS, BARRY L	_	3.2 NAME			JACKIE BROME
STREET ADDRESS	700 N. PEARL, STE 2400		3.3 STREET		ADDRESS	2 CORPORATE PARK, STE 100
	•		3.4. CITY-S			IRVINE, CA 92606
CITY-ST-ZIP	DALLAS TX	XX DELETE	4.1 TI		1-41	☐ Change ☐ Addition
	ANIDDIE THOMAS D		4.2 NAME			_ · _
NAME	ANDRUS, THOMAS R		4.3 STREE		ADDDESS	
STREET ADORESS	100 H. 1 CAIL, OIL 2100				ľ	
CITY-ST-ZIP	DALLAS TX	XX DELETE	4.4 CITY-S		1.21	☐ Change ☐ Addition
TITLE	GCS	XX DEFEIG	5.1 TITLE 5.2 NAME			
NAME	BLACKWELL, L K				ADDDESS	
STREET ADDRESS 700 N. PEARL, STE 2400			5.3 STREET ADDRESS			
CITY-ST-ZIP	UALLAO IX			5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addition
TITLE	AS	₹ ¥ DEFE (F				☐ Change (_) Addition
NAME	CORNELL, KAREN H		6.2 N			
STREET ADDRESS	700 N. PEARL , STE 2400				ADDRESS	
CITY-ST-ZIP	DALLAS TX		6.4 C	ITY-ST	T-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: