... 2001 UNIFORM BUSINESS REPORT (UBR) Apr 24, 2001 8:00 am Secretary of State DOCUMENT # F9600005007 1. Entity Name AMRESCO RESIDENTIAL MORTGAGE CORPORATION 04-24-2001 90276 027 ***150.00 Mailing Address Principal Place of Business 700 N PEARL ST 700 N PEARL ST STE 1900 STE 1900 DALLAS TX 75201-7424 DALLAS TX 75201-7424 2. Principal Place of Business 3. Mailing Address No Change No Change Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 75-2667449 Not Applicable Country \$8.75 Additional Zip Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code FL 8. 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** Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ٧S TITI F □ Delete TITLE ROYER, MERRI K NAME MCCOY, MERRI H. NAME STREET ADDRESS 700 N PEARL ST, SSTE 1900 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75201 Change ☐ Addition VCAO ☐ Delete TITLE TITLE KIRKLAND, RONALD B NAME NAME 700 N PEARL ST, SSTE 1900 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P DALLAS TX 75201 XX Change _ _ Addition ☐ Delete TITLE --TiTiLE BLACKWELL, KEITH L NAME BLACKWELL, L. KEITH NAME STREET ADDRESS 700 N PEARL ST, SSTE 1900 STREET ADDRESS CITY-ST-ZIP DALLAS TX 75201 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

L. Keith Blackwell, President 4-13-01

Date

D

☐ Delete

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

TITLE

NAME

CR2E034 (10/00)

☐ Change

☐ Addition