

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006097

FILED
Apr 19, 2006
Secretary of State

Entity Name: DHI MORTGAGE COMPANY GP, INC.

Current Principal Place of Business:

301 COMMERCE ST., SUITE 500
FORT WORTH, TX 76102

New Principal Place of Business:

Current Mailing Address:

301 COMMERCE ST., SUITE 500
FORT WORTH, TX 76102

New Mailing Address:

FEI Number: 74-2853238

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CFO () Delete
Name: WINTER, MARK C
Address: 12357 RIATA TRACE PARKWAY C150
City-St-Zip: AUSTIN, TX 78727

Title: D () Delete
Name: PERISON, STEPHAN P
Address: 301 COMMERCE ST., SUITE 500
City-St-Zip: FORT WORTH, TX 76102

Title: P () Delete
Name: PRESENT, RANDALL C
Address: 12357 RIATA TRACE PARKWAY C150
City-St-Zip: AUSTIN, TX 78727

Title: D AS () Delete
Name: WHEAT, BILL W
Address: 301 COMMERCE ST., SUITE 500
City-St-Zip: FORT WORTH, TX 76102

Title: EVP () Delete
Name: LUECHAUER, SONYA
Address: 12357 RIATA TRACE PARKWAY C150
City-St-Zip: AUSTIN, TX 78727

Title: STD () Delete
Name: DWYER, STACEY H
Address: 301 COMMERCE ST., SUITE 500
City-St-Zip: FORT WORTH, TX 76102

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AS (X) Change () Addition
Name: MONTANO, THOMAS B
Address: 301 COMMERCE ST., #500
City-St-Zip: FORT WORTH, TX 76102

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS B. MONTANO

AS

04/19/2006

Electronic Signature of Signing Officer or Director

_____ Date