

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

FILED

Apr 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J65078 (4)
1. Corporation Name
ASSOCIATES FIRST CAPITAL MORTGAGE CORPORATION

Principal Place of Business Mailing Address
% ASSOCIATES CORPORATION OF NORTH AMERICA P BOX 660237
250 CARPENTER FREEWAY CORP TAX DEPT
IRVING TX 75062 DALLAS TX 75266-0237
US US



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		04/02/1987		05/01/1996	
22 City & State		27 City & State		4. FEI Number		Applied For	
23 Zip		28 Zip		06-1201788		Not Applicable	
24 Country		29 Country		5. Certificate of Status Desired		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
				<input type="checkbox"/>		<input type="checkbox"/> Yes <input type="checkbox"/> No	

\$8.75 Additional
Fee Required

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent
THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE 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 of officer or 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	EVPC	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANDICK, DENNIS J	1.2 NAME	
STREET ADDRESS	250 CARPENTER FWY.	1.3 STREET ADDRESS	
CITY- ST- ZIP	IRVING TX	1.4 CITY- ST- ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MARSHALL, HAROLD D	2.2 NAME	
STREET ADDRESS	250 CARPENTER FWY.	2.3 STREET ADDRESS	
CITY- ST- ZIP	IRVING TX	2.4 CITY- ST- ZIP	
TITLE	PD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WATSON, DONALD R	3.2 NAME	
STREET ADDRESS	250 CARPENTER FWY.	3.3 STREET ADDRESS	
CITY- ST- ZIP	IRVING TX	3.4 CITY- ST- ZIP	
TITLE	VT	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUGHES, JOHN F.	4.2 NAME	
STREET ADDRESS	250 CARPENTER FWY.	4.3 STREET ADDRESS	
CITY- ST- ZIP	IRVING TX	4.4 CITY- ST- ZIP	
TITLE	S	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAYES, THOMAS	5.2 NAME	
STREET ADDRESS	250 CARPENTER FREEWAY	5.3 STREET ADDRESS	
CITY- ST- ZIP	IRVING TX	5.4 CITY- ST- ZIP	
TITLE	AVS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREENE, P.J.	6.2 NAME	
STREET ADDRESS	250 CARPENTER FWY.	6.3 STREET ADDRESS	
CITY- ST- ZIP	IRVING TX	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:

Patrick J. Greene
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrick J. Greene Asst VP & Asst Secretary 04/20/97 (972) 652-4000

Date

Daytime Phone #

DA95128

CR2E034 (9/96)