FILED

Ass't Vice President & Ass't Secretary

2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAM

Mar 13, 2001 8:00 am Secretary of State **DOCUMENT # P02190** 1. Entity Name ASSOCIATES FIRST CAPITAL MORTGAGE CORPORATION 03-13-2001 90061 032 ***150.00 Principal Place of Business Mailing Address % ASSOCIATES CORP OF NORTH AMERICA P O BOX 660237 930250 CORP TAX DEPT 250 CARPENTER FWY. DALLAS TX 75266-0237 IRVING TX 75062 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 06-1052175 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND RD. PLANTATION FL 33324 City 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CR2E034 (10/00) TITLE ☐ Delete TITLE Change | ☐ Addition WATSON, DONALD R NAME NAME 250 CARPENTER FREEWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **IRVING TX** CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition HUGHES, JOHN F. NAME NAME **250 CARPENTER FREEWAY** STREET ADDRESS STREET ADDRESS **IRVING TX** CITY-ST-ZIP CITY-ST-ZIP vice President & Secretary & Change_ Addition TITLE Delete ---TITLE LISKOW, FREDERIC C NAME NAME Martin 2 Word 300 St. Paul Place 250 CARPENTER FREEWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **IRVING TX** CITY-ST-ZIP Baltimore, 4D 21202 Change TITLE Delete TITLE AUP & ASEC ☐ Addition GREENE, P.J. Michael J Frederick NAME NAME STREET ADDRESS 250 CARPENTER FREEWAY STREET ADDRESS 250 carponter FreeWay CITY-ST-ZIP CITY-ST-ZIP **IRVING TX** TITLE ☐ Delete □ Change ☐ Addition TITLE SLATTEN, MICHAEL NAME NAME 250 CARPENTER FREEWAY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **IRVING TX** CITY-ST-ZIP Delete ☐ Change TITLE ☐ Addition KATLEIN, GLEN J NAME NAME 250 CARPENTER FRWY STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **IRVING TX 75062** CITY-ST-7IP 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 appeared.