

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # P32499 (6)

1. Corporation Name

EMC MORTGAGE CORPORATION



Principal Place of Business

Mailing Address

222 W LOS COLINAS BLVD
STE #600
IRVING TX 75039
US

115 SOUTH JEFFERSON ROAD
ATTN: NANCY LOPEZ
WHIPPANY NJ 07981
US

3. Date Incorporated or Qualified
01/16/1991

3a. Date of Last Report
03/14/1995

2. Principal Place of Business

2a. Mailing Address

21 222 W. Las Colinas Blvd.

26 222 W. Las Colinas Blvd.

4. FEI Number
13-3587347

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 600

27 Suite 600

5. Certificate of Status Desired \$8.75 Additional Fee Required

City & State

City & State

23 Irving TX

28 Irving TX

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

Zip

Country

Zip

Country

24 75039

25 USA

29 75039

30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

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

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, typed or printed name of registered agent, if applicable

(SOLE Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DSVT	<input checked="" type="checkbox"/> DELETE
NAME	BRENNAN, WILLIAM D	
STREET ADDRESS	222 WEST LAS COLINAS BLVD. STE. #600	
CITY-ST-ZIP	IRVING TX 75039	
TITLE	DSVM	<input type="checkbox"/> DELETE
NAME	STEPANEK, SUE	
STREET ADDRESS	222 WEST LAS COLINAS BLVD. STE. #600	
CITY-ST-ZIP	IRVING TX 75039	
TITLE	PCD	<input type="checkbox"/> DELETE
NAME	RAICE, EDWARD	
STREET ADDRESS	222 WEST LAS COLINAS BLVD. STE. #600	
CITY-ST-ZIP	IRVING TX 75039	
TITLE	CEOD	<input type="checkbox"/> DELETE
NAME	LEHMAN, DAVID M	
STREET ADDRESS	222 WEST LAS COLINAS BLVD. STE. #600	
CITY-ST-ZIP	IRVING TX 75039	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	FERGERSON, RANADA R	
STREET ADDRESS	222 WEST LAS COLINAS BLVD. STE. #600	
CITY-ST-ZIP	IRVING TX 75039	
TITLE	DEAS	<input type="checkbox"/> DELETE
NAME	RUYLE, RALENE	
STREET ADDRESS	222 WEST LAS COLINAS BLVD. #600	
CITY-ST-ZIP	IRVING TX 75039	

1.1 TITLE	S/T/V/Controller	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Susan Mitchell	
1.3 STREET ADDRESS	222 W. Las Colinas Blvd. #600	
1.4 CITY-ST-ZIP	Irving, TX 75039	
2.1 TITLE	Sr. V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Debbie Miller	
2.3 STREET ADDRESS	222 W. Las Colinas Blvd. #600	
2.4 CITY-ST-ZIP	Irving, TX 75039	
3.1 TITLE	Sr. V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Roger C. Teufel	
3.3 STREET ADDRESS	222 W. Las Colinas Blvd. #600	
3.4 CITY-ST-ZIP	Irving, TX 75039	
4.1 TITLE	Sr. V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Larry Simpson	
4.3 STREET ADDRESS	222 W. Las Colinas Blvd. #600	
4.4 CITY-ST-ZIP	Irving, TX 75039	
5.1 TITLE	Sr. V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Sherri Anderson	
5.3 STREET ADDRESS	222 W. Las Colinas Blvd. #600	
5.4 CITY-ST-ZIP	Irving, TX 75039	
6.1 TITLE	Sr. V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	George Court	
6.3 STREET ADDRESS	222 W. Las Colinas Blvd. #600	
6.4 CITY-ST-ZIP	Irving, TX 75039	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Roger C. Teufel*

Roger C. Teufel, Sr. VP

4/17/96 (214) 444-2860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE TELEPHONE #

CR2E034 (12/95)