

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32499

FILED
Jan 22, 2008
Secretary of State

Entity Name: EMC MORTGAGE CORPORATION

Current Principal Place of Business:

800 STATE HWY 121 BYPASS
LEWISVILLE, TX 75067 US

New Principal Place of Business:

Current Mailing Address:

2780 LAKE VISTA DRIVE
LEWISVILLE, TX 75067

New Mailing Address:

FEI Number: 13-3587347 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: DEVS () Delete
Name: VILLANI, ANTHONY W
Address: 2780 LAKE VISTA DR
City-St-Zip: LEWISVILLE, TX 75067

Title: DCEO () Delete
Name: VEILA, JOHN
Address: 2780 LAKE VISTA DR
City-St-Zip: LEWISVILLE, TX 75067 US

Title: PCOO () Delete
Name: VELLA, JOHN
Address: 909 HIDDEN RIDGE DRIVE, STE 200
City-St-Zip: IRVING, TX 75038 US

Title: CFOT () Delete
Name: LETO, JUDITH L
Address: 2780 LAKE VISTA DR
City-St-Zip: LEWISVILLE, TX 75067

Title: D () Delete
Name: LETO, JUDITH
Address: 2780 LAKE VISTA DR
City-St-Zip: LEWISVILLE, TX 75067 US

Title: SVP () Delete
Name: ANDREWS, GAIL D
Address: 909 HIDDEN RIDGE ROAD SUITE #200
City-St-Zip: IRVING, TX 75038

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DCEO (X) Change () Addition
Name: VELLA, JOHN
Address: 2780 LAKE VISTA DR
City-St-Zip: LEWISVILLE, TX 75067 US

Title: PCOO (X) Change () Addition
Name: VELLA, JOHN
Address: 2780 LAKE VISTA DR.
City-St-Zip: LEWISVILLE, TX 75067 US

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

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

Title: SVP (X) Change () Addition
Name: ANDREWS, GAIL D
Address: 2780 LAKE VISTA DR.
City-St-Zip: LEWISVILLE, TX 75067

I hereby certify that the information supplied with this filing does not qualify 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: GAIL ANDREWS

Electronic Signature of Signing Officer or Director

SVP

01/22/2008

Date