

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

\*PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # P92000003102**

1. Corporation Name  
**NATIONSCREDIT MORTGAGE CORPORATION OF FLORIDA**

Principal Place of Business  
225 E JOHN CAPENTER FREEWAY  
SUITE 1000  
IRVING TX 75062  
US

Mailing Address  
CANTERBURY GREEN  
201 BROAD STREET  
STAMFORD CT 06901  
US

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90192 050 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**11/09/1992**

4. FEI Number **56-1796723** Applied For  
Not Applicable

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

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

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 10301 Deerwood Park Blvd.

22 City & State

27 FL9-016-02-15

23 Zip

28 Jacksonville, FL

24 Country

29 32256 30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM  
1200 S PINE ISLAND  
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 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 PD ☐ DELETE  
NAME CRAFT, DENNIS L.  
STREET ADDRESS 4520 ALEXANDRA DR  
CITY-ST-ZIP COLLEYVILLE TX 76034

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VTD ☐ DELETE  
NAME ANGELILLI, LAWRENCE  
STREET ADDRESS 4504 STANHOPE AVENUE  
CITY-ST-ZIP DALLAS TX 75205

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE CFO ☐ DELETE  
NAME CUTRONA, JOSEPH A  
STREET ADDRESS 2612 SHADOWRIDGE DRIVE  
CITY-ST-ZIP ARLINGTON TX 76006

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE V ☐ DELETE  
NAME HOFF, ALAN M  
STREET ADDRESS 20 SPLIT LEVEL ROAD  
CITY-ST-ZIP RIDGEFIELD CT 06877

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE VS ☐ DELETE  
NAME HOLZ, ROBERT J  
STREET ADDRESS 4901 GREEN OAKS  
CITY-ST-ZIP COLLEYVILLE TX 76034

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE VAS ☐ DELETE  
NAME FAGIN, SARAH L  
STREET ADDRESS 7626 LAKECREST CIR  
CITY-ST-ZIP IRVING TX 75063

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)

535432-90192-50  
P92000063102

NationsCredit Mortgage Corporation of Florida  
(Florida)

PRINCIPAL OFFICERS AND DIRECTORS

DIRECTORS

Business Address

William M. Ross Director	10401 Deerwood Park Boulevard Jacksonville, FL 32256
Robert J. Holz Director	225 E. John Carpenter Freeway Irving, TX 75062

OFFICERS

Business Address

William M. Ross President	10401 Deerwood Park Boulevard Jacksonville, FL 32256
Robert J. Holz Vice President and Secretary	225 E. John Carpenter Freeway Irving, TX 75062
Jesse K. Bray Senior Vice President and Treasurer	225 E. John Carpenter Freeway Irving, TX 75062
Monica E. Windham Vice President	10301 Deerwood Park Boulevard Jacksonville, FL 32256
Charlene A. Tolar Assistant Secretary	225 E. John Carpenter Freeway Irving, TX 75062
Valerie L. Alexander Assistant Secretary	10401 Deerwood Park Boulevard Jacksonville, FL 32256