

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

DOCUMENT # **P94000036710**

1. Corporation Name

OCWEN CARD SOLUTIONS, INC.

Principal Place of Business

1675 PALM BEACH LAKES BLVD
THE FORUM SUITE 1002
W PALM BEACH FL 33401
US

Mailing Address

1675 PALM BEACH LAKES BLVD
THE FORUM SUITE 1002
W PALM BEACH FL 33401
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

ERBEY, JOHN R
1675 PALM BEACH LAKES BLVD
THE FORUM SUITE 1002
W PALM BEACH FL 33401

3. Date Incorporated or Qualified

05/11/1994

4. FEI Number

65-0493444

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.



Yes ☐ No

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~DCP~~ ☐ DELETE

NAME ERBEY, WILLIAM C.
STREET ADDRESS 1675 PALM BEACH LAKES BLVD SUITE 1002
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ~~MS~~ ☐ DELETE

NAME ERBEY, JOHN R.
STREET ADDRESS 1675 PALM BEACH LAKES BLVD SUITE 1002
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ~~MCFO~~ ☐ DELETE

NAME REICH, CHRISTINE A.
STREET ADDRESS 1675 PALM BEACH LAKES BLVD SUITE 1002
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ~~SVAS~~ ☒ DELETE

NAME ~~DLUTOWSKI, JOSEPH A~~
STREET ADDRESS ~~1675 PALM BEACH LAKES BLVD SUITE 1002~~
CITY-ST-ZIP ~~WEST PALM BEACH FL~~

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DC ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE P ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE SVP ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE SVPCFO ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE VPAS ☐ 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.

SIGNATURE:

JOHN R. BARNES JOHN R. BARNES, SENIOR VICE PRESIDENT 7/12/99 561-682-8000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Aug 02, 1999 8:00 am
Secretary of State

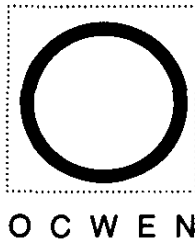
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599 753-70013-42
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July 12, 1999

Florida Department of State
Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, FL 32302-1500

RE: Ocwen Card Solutions, Inc.

Enclosed you will find the 1999 Annual Report. This letter is a request for the waiver of the late fees, as the original Annual Report packet was never received in our office. Please note that the annual fees have always been paid on a timely basis and your consideration is greatly appreciated.

Please contact me at 561-682-8797 if you have any questions or comments.

Sincerely,



Cherryl Kirby

Enclosures

549753-90013-42
P94000086710

OCWEN CARD SOLUTIONS, INC.

EXHIBIT "A"

Director

William C. Erbey

Officers

William C. Erbey	Chairman of the Board & CEO	1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401
John R. Erbey	Senior Managing Director and Secretary	1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401
Christine A. Reich	President	1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401
Ronald M. Faris	Executive Vice President	1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401
Mark S. Zeidman	Senior Vice President and Chief Financial Officer	1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401
John R. Barnes	Senior Vice President	1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401
Trini L. Donato	Vice President and Assistant Secretary	1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401
Timothy J. Reynolds	Assistant Secretary	1675 Palm Beach Lakes Blvd. West Palm Beach, FL 33401