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

FILED
99 AUG 17 PM 3:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000036522

1. Corporation Name

OCWEN TECHNOLOGY XCHANGE, INC.

Principal Place of Business	Mailing Address
1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401	

000002963818--8
-08/19/99--01012--015
****550.00 ****550.00

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 4/22/98

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

4. FEI Number: 65-0832817 ☐ 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

7. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
JOHN R. ERBEY 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	11 TITLE / 12 NAME / 13 STREET ADDRESS / 14 CITY-ST-ZIP	D ☐ Change ☐ Addition WILLIAM C. ERBEY 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	21 TITLE / 22 NAME / 23 STREET ADDRESS / 24 CITY-ST-ZIP	SVP/S ☐ Change ☐ Addition TRINI L. DONATO 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	31 TITLE / 32 NAME / 33 STREET ADDRESS / 34 CITY-ST-ZIP	V/T ☐ Change ☐ Addition RICHARD DELGADO 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	41 TITLE / 42 NAME / 43 STREET ADDRESS / 44 CITY-ST-ZIP	SVP/CFO ☐ Change ☐ Addition MARK S. ZEIDMAN 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	51 TITLE / 52 NAME / 53 STREET ADDRESS / 54 CITY-ST-ZIP	AS ☐ Change ☐ Addition TIMOTHY J. REYNOLDS 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE TS	61 TITLE / 62 NAME / 63 STREET ADDRESS / 64 CITY-ST-ZIP	DC ☐ Change ☐ Addition JOHN R. ERBEY 1675 PALM BEACH LAKES BLVD. WEST PALM BEACH, FL 33401

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: TRINI L. DONATO 8/10/99 561-682-8000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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