

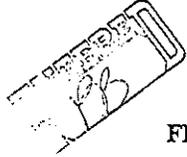
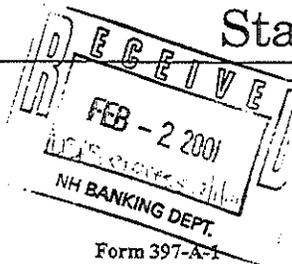


A. ROLAND ROBERGE
BANK COMMISSIONER

State of New Hampshire

Banking Department

56 Old Suncook Road
Concord, New Hampshire 03301
Telephone: (603) 271-3561
FAX: (603) 271-1090



Form 397-A-1 FIRST MORTGAGE BANKER/BROKER ANNUAL REPORT

READ INSTRUCTIONS CAREFULLY!!!

INSTRUCTIONS

1 ONLY INFORMATION REGARDING NEW HAMPSHIRE FIRST MORTGAGE LOANS SHOULD BE REPORTED ON THIS FORM. Don't double-count loans. List all year 2000 loans brokered on Schedule A, and all year 2000 loans made on Schedule B. List all loans made during the period January 1, 2000 to December 31, 2000.

2 Fully completed reports must be postmarked on or before February 1 or the licensee WILL be fined \$25/per day for each licensed location. **FINES WILL NOT BE WAIVED!** Due to limited resources, the department is not able to remind licensees if reports are late. Therefore, to avoid a potentially significant fine the licensee should take steps to make certain that the report is completed and postmarked by February 1.

3 Complete all items. **DO NOT** leave items blank. Reports with blank items will be returned for completion. Fines will be assessed based on the postmark date of completed reports. The department is under no obligation to review and return incomplete reports before the February 1 deadline.

4 If you did not make or purchase any New Hampshire loans during the reporting year, utilize this form and make an affirmative statement that no such loans were made/purchased, (ie: "none", "0", "zero", etc.).

5 **DO NOT** use "N/A", state "not applicable" or leave blank spaces.

6 Items requiring a numerical response which are marked "N/A" or "not applicable", or forms submitted with items left blank, will be considered incomplete, will be returned, and will be subject to fines if not completed and returned to this office on or before February 1.

7 Fines will **NOT** be waived for failure to submit a fully completed report postmarked on or before February 1. Failure to submit a fully completed report shall be considered to be within the control of the licensee.

8 If you held a license for any portion of the reporting year you must file a report, even if no loans were made or purchased. Failure to file will result in a \$25/per day fine for each licensed location.

9 **REPORTS TRANSMITTED VIA "FAX" WILL NOT BE ACCEPTED. LATE FILING FINES WILL BE ASSESSED UNLESS AN ORIGINAL SIGNED AND NOTARIZED REPORT FORM IS RECEIVED BY THIS OFFICE POSTMARKED ON OR BEFORE FEBRUARY 1.**

**IT IS STRONGLY RECOMMENDED THAT THIS FORM BE FILED VIA REGISTERED MAIL, EXPRESS MAIL OR OTHER DELIVERY MECHANISM THAT WILL PROVIDE YOU WITH A DATED, SIGNED RECEIPT OF DELIVERY
DO NOT SEND ANY MONEY WITH THIS REPORT**

Financial Resources, Inc. Reporting Period: January 1, 2000 thru December 31, 2000

Name of licensee FINANCIAL RESOURCES, INC Licensee's Federal Tax ID # 02-0433840

Trade Name d/b/a (if applicable) _____ License # (s) 5902-MB
(for reporting period)

Place of business 15 Northview Drive Meredith NH 03253
(street) (city) (state) (zip)

Number of offices included 1 (If more than one office, attach sheet listing addresses of all offices included in this report.)

Type of business conducted: Mortgage Banker Mortgage Broker (Check both if applicable.)

Company contact person (President, Chief Executive Officer or Senior Partner of Licensee)
Name Scott Farah Title President

Business Address: Same
(Street)

(City) (State) (Zip) (Direct Line Telephone) (603)279-1133

**SCHEDULE A
NH FIRST MORTGAGE LOANS BROKERED**

	No. of NH Loans	\$ Amount (Omit Cents)
1. NH first mortgage loans BROKERED during reporting year	125	12,422,812

**SCHEDULE B
ANALYSIS OF NH FIRST MORTGAGE LOANS MADE**

	No. of NH Loans	\$ Amount (Omit Cents)
2. NH first mortgage loans MADE during reporting year	125	12,422,812
3. Total balances outstanding on Dec 31 for all NH first mortgage loans retained or services	0	0

**SCHEDULE C
ANALYSIS OF NH FIRST MORTGAGE LOANS MADE BY NUMBER AND DOLLAR AMOUNT**

NH first mortgage loans MADE during reporting year:

	No. of NH Loans	\$ Amount (Omit Cents)
\$ 1 thru \$ 50,000	9	399,645
\$ 50,001 thru \$ 75,000	30	1,887,357
\$ 75,001 thru \$ 100,000	94	2,968,098
\$ 100,001 thru \$ 125,000	72	3,585,858
\$ 125,001 thru \$ 150,000	12	1,606,670
Over \$ 150,000	18	1,981,250
4. Total NH first mortgage loans MADE	125	12,422,812

- * Must agree
- # Must agree

None Closed in our Name

AFFIRMATION

I, SCOTT FARAH, the undersigned, being
(Name)
the PRESIDENT of FINANCIAL RESOURCES, INC. swear, that the
(Title) (Company Name)

foregoing statements have been examined by me, including any statements made in accompanying papers, and to the best of my knowledge and belief are true, accurate and complete.

Signature: 

State of New Hampshire)
County of Bellamy) SS

Subscribed and sworn to before me this 15th day of February, Year 2001


Notary Public/Justice of the Peace

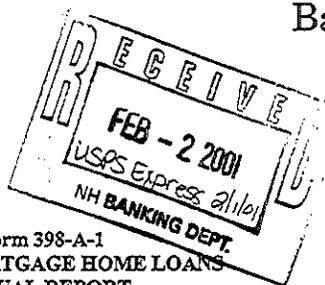
My commission expires 12/6/2005



State of New Hampshire

Banking Department

56 Old Suncook Road
Concord, New Hampshire 03301
Telephone: (603) 271-3561
FAX: (603) 271-1090



Form 398-A-1
SECOND MORTGAGE HOME LOANS
ANNUAL REPORT

A. ROLAND ROBERGE
BANK COMMISSIONER

READ INSTRUCTIONS CAREFULLY!!!

INSTRUCTIONS

1 ONLY INFORMATION REGARDING NEW HAMPSHIRE SECOND MORTGAGE LOANS SHOULD BE REPORTED ON THIS FORM. List all loans made during the period January 1, 2000 to December 31, 2000.

2 Fully completed reports must be postmarked on or before February 1 or the licensee WILL be fined \$25/per day for each licensed location. FINES WILL NOT BE WAIVED! Due to limited resources, the department is not able to remind licensees if reports are late. Therefore, to avoid a potentially significant fine the licensee should take steps to make certain that the report is completed and postmarked by February 1.

3 Complete all items. DO NOT leave items blank. Reports with blank items will be returned for completion. Fines will be assessed based on the postmark date of completed reports. The department is under no obligation to review and return incomplete reports before the February 1 deadline.

4 If you did not make or purchase any New Hampshire loans during the reporting year, utilize this form and make an affirmative statement that no such loans were made/purchased, (ie: "none", "0", "zero", etc.).

5 DO NOT use "N/A", state "not applicable" or leave blank spaces.

6 Items requiring a numerical response which are marked "N/A" or "not applicable", or forms submitted with items left blank, will be considered incomplete, will be returned, and will be subject to fines if not completed and returned to this office on or before February 1.

7 Fines will NOT be waived for failure to submit a fully completed report postmarked on or before February 1. Failure to submit a fully completed report shall be considered to be within the control of the licensee.

8 If you held a license for any portion of the reporting year you must file a report, even if no loans were made or purchased. Failure to file will result in a \$25/per day fine for each licensed location.

9 REPORTS TRANSMITTED VIA "FAX" WILL NOT BE ACCEPTED. LATE FILING FINES WILL BE ASSESSED UNLESS AN ORIGINAL SIGNED AND NOTARIZED REPORT FORM IS RECEIVED BY THIS OFFICE POSTMARKED ON OR BEFORE FEBRUARY 1.

IT IS STRONGLY RECOMMENDED THAT THIS FORM BE FILED VIA REGISTERED MAIL, EXPRESS MAIL OR OTHER DELIVERY MECHANISM THAT WILL PROVIDE YOU WITH A DATED, SIGNED RECEIPT OF DELIVERY DO NOT SEND ANY MONEY WITH THIS REPORT

Reporting Period: January 1, 2000 thru December 31, 2000

Name of licensee FINANCIAL RESOURCES, INC. *assistance of The Lakes Region Inc.* Licensee's Federal Tax ID # 02-0433840

Trade Name d/b/a (if applicable) _____ License # (s) 5903-MHL
(for reporting period)

Place of business 15 NORTHVIEW DRIVE MEREDITH NH 03253
(street) (city) (state) (zip)

Number of offices included 1 (If more than one office, attach sheet listing addresses of all offices included in this report.)

Company contact person (President, Chief Executive Officer or Senior Partner of Licensee)
Name SCOTT FARAH Title PRESIDENT

Business Address: SAME
(Street)

(603) 279-1133

**SCHEDULE A
ANALYSIS OF NH SECOND MORTGAGE HOME LOANS**

1. NH second mortgage home loans MADE during reporting year
2. Total balances outstanding on December 31 for all NH second mortgage home loans retained or serviced

NOV 5 - 84
BANKING DEPT

No. of NH Loans 5

\$ Amount
(Omit Cents)

\$ 53,500

0 0

**SCHEDULE B
ANALYSIS OF NH SECOND MORTGAGE HOME LOANS MADE BY NUMBER & DOLLAR AMOUNT**

3. NH second mortgage home loans MADE during the reporting year:

- \$ 01 to \$10,000.00 inclusive
- \$10,000.01 to \$20,000.00 inclusive
- \$20,000.01 to \$30,000.00 inclusive
- \$30,000.01 to \$40,000.00 inclusive
- \$40,000.01 to \$50,000.00 inclusive
- Over \$50,000.01

No. of NH Loans

~~0~~
~~0~~
~~1~~
~~0~~
~~0~~
~~0~~
~~0~~

\$ Amount
(Omit Cents)

~~0~~
~~0~~
~~28,500~~
~~31,800~~
~~0~~
~~0~~
~~0~~

\$ 53,500

4. Total NH second mortgage home loans MADE

* Must agree
Must agree

none closed in our none

AFFIRMATION

I, SCOTT FARAH, the undersigned, being
the PRESIDENT (Name) of FINANCIAL RESOURCES, INC. swear, that the
(Title) (Company Name)

foregoing statements have been examined by me, including any statements made in accompanying papers, and to the best of my knowledge and belief are true, accurate and complete.



Signature

State of New Hampshire)
County of Bellknop) SS

Subscribed and sworn to before me this 31 ST day of JANUARY, Year 2000


Notary Public/Justice of the Peace
My commission expires 12/6/2005



A. ROLAND ROBERGE
BANK COMMISSIONER

State of New Hampshire

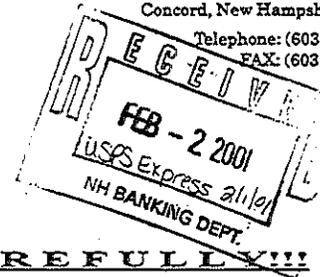
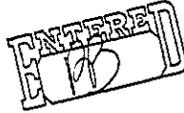
Banking Department

56 Old Suncook Road

Concord, New Hampshire 03301

Telephone: (603) 271-3561

FAX: (603) 271-1090



Form 399-A-1 SMALL LOANS ANNUAL REPORT

READ INSTRUCTIONS CAREFULLY!!!

INSTRUCTIONS

1 ONLY INFORMATION REGARDING NEW HAMPSHIRE SMALL LOANS SHOULD BE REPORTED ON THIS FORM. List all loans made during the period January 1, 2000 to December 31, 2000.

2 Fully completed reports must be postmarked on or before February 1 or the licensee WILL be fined \$25/per day for each licensed location. FINES WILL NOT BE WAIVED! Due to limited resources, the department is not able to remind licensees if reports are late. Therefore, to avoid a potentially significant fine the licensee should take steps to make certain that the report is completed and postmarked by February 1.

3 Complete all items. DO NOT leave items blank. Reports with blank items will be returned for completion. Fines will be assessed based on the postmark date of completed reports. The department is under no obligation to review and return incomplete reports before the February 1 deadline.

4 If you did not make or purchase any New Hampshire loans during the reporting year, utilize this form and make an affirmative statement that no such loans were made/purchased, (ie: "none", "0", "zero", etc.).

5 DO NOT use "N/A", state "not applicable" or leave blank spaces.

6 Items requiring a numerical response which are marked "N/A" or "not applicable", or forms submitted with items left blank, will be considered incomplete, will be returned, and will be subject to fines if not completed and returned to this office on or before February 1.

7 Fines will NOT be waived for failure to submit a fully completed report postmarked on or before February 1. Failure to submit a fully completed report shall be considered to be within the control of the licensee.

8 If you held a license for any portion of the reporting year you must file a report, even if no loans were made or purchased. Failure to file will result in a \$25/per day fine for each licensed location.

9 REPORTS TRANSMITTED VIA "FAX" WILL NOT BE ACCEPTED. LATE FILING FINES WILL BE ASSESSED UNLESS AN ORIGINAL SIGNED AND NOTARIZED REPORT FORM IS RECEIVED BY THIS OFFICE POSTMARKED ON OR BEFORE FEBRUARY 1.

**IT IS STRONGLY RECOMMENDED THAT THIS FORM BE FILED VIA REGISTERED MAIL,
EXPRESS MAIL OR OTHER DELIVERY MECHANISM THAT WILL PROVIDE YOU WITH A
DATED, SIGNED RECEIPT OF DELIVERY
DO NOT SEND ANY MONEY WITH THIS REPORT**

Reporting Period: January 1, 2000 thru December 31, 2000

Name of licensee FINANCIAL RESOURCES, INC. Licensee's Federal Tax ID # 02-0433840

Trade Name d/b/a (if applicable) _____ License # (s) 6082-SM
(for reporting period)

Place of business 15 NORTHVIEW DRIVE MEREDITH NH 03253
(street) (city) (state) (zip)

Number of offices included 1 (If more than one office, attach sheet listing addresses of all offices included in this report.)

Company contact person (President, Chief Executive Officer or Senior Partner of Licensee)

Name SCOTT FARAH Title PRESIDENT

Business Address: SAME
(Street)

(City) (State) (Zip) (Direct Line Telephone) (603) 279-1133

**SCHEDULE A
ANALYSIS OF NH SMALL LOANS**

	<u>No. of NH Loans</u>		<u>\$ Amount (Ornit Cents)</u>
NH small loans MADE during reporting year including advances on revolving lines of credit	* <u>0</u>	# \$	<u>0</u>
Total balances outstanding on December 31	<u>0</u>		<u>0</u>

**SCHEDULE B
ANALYSIS OF NH SMALL LOANS AND ADVANCES MADE, BY NUMBER & DOLLAR AMOUNT**

NH small loans and advances MADE during the reporting year:	<u>No. of NH Loans</u>		<u>\$ Amount (Ornit Cents)</u>
\$.01 to \$ 600.00 inclusive	<u>0</u>	\$	<u> </u>
\$ 600.01 to \$ 1,500.00 inclusive	<u>0</u>		<u> </u>
\$1,500.01 to \$ 5,000.00 inclusive	<u>0</u>		<u> </u>
\$5,000.01 to \$ 7,500.00 inclusive	<u>0</u>		<u> </u>
\$7,500.01 to \$10,000.00 inclusive	<u>0</u>		<u> </u>
Advances under revolving credit lines	<u>0</u>		<u> </u>
Total NH small loans MADE	* <u>0</u>	# \$	<u>0</u>

**SCHEDULE C
ANALYSIS OF NH SMALL LOANS MADE BY TYPE OF SECURITY**

NH small loans MADE during the reporting year based IN WHOLE OR IN LARGER PART upon the following: NA

	<u>No. of NH Loans</u>		<u>\$ Amount (Ornit Cents)</u>
Household Goods	<u> </u>		<u> </u>
Other Chattels	<u> </u>		<u> </u>
Motor Vehicles	<u> </u>		<u> </u>
Co-signer/Co-Borrower Notes	<u> </u>		<u> </u>
Wage Assignments	<u> </u>		<u> </u>
Unsecured Closed-End Notes	<u> </u>		<u> </u>
Advances under revolving credit lines	<u> </u>		<u> </u>
Other	<u> </u>		<u> </u>
Total	* <u> </u>	# \$	<u> </u>

* Must agree
Must agree

AFFIRMATION

I, SCOTT FARAH, the undersigned, being
(Name)
the PRESIDENT of FINANCIAL RESOURCES, INC. swear, that the
(Title) (Company Name)

foregoing statements have been examined by me, including any statements made in accompanying papers, and to the best of my knowledge and belief are true, accurate and complete.



Signature

State of New Hampshire)
County of Belknap) SS

Subscribed and sworn to before me this 15th day of February, Year 2001


Notary Public/Justice of the Peace



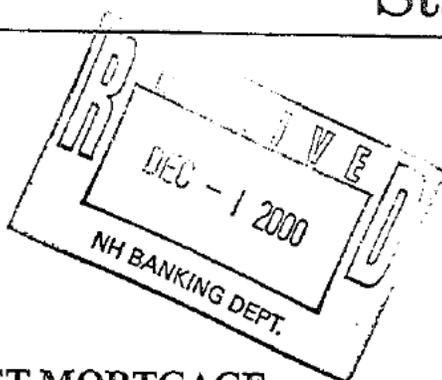
State of New Hampshire

Banking Department

56 Old Suncook Road
Concord, New Hampshire 03301

Telephone: (603) 271-3561
FAX: (603) 271-1090

A. ROLAND ROBERGE
BANK COMMISSIONER



FORM 397-A-2

APPLICATION FOR FIRST MORTGAGE BANKER AND/OR BROKER LICENSE

License Year: 2001

FOR OFFICE USE ONLY

Ck. # 0029395

Amt. \$ 250.00

Rec'd By [REDACTED] Date 12/1/00

Entered By [REDACTED] ***** Date 12.7.00

App. Complete [REDACTED] Date 2/13/01

Approved By [REDACTED] Date 3/1/01

Pr. Lic. # 5902 Date Mailed 2/1/01

New and Renewal Application Fees

Principal Office \$250.00 Each Branch Office \$250.00

Make Check Payable To:
"STATE OF NEW HAMPSHIRE"

INSTRUCTIONS: FULLY complete all items. Type or Print. Incomplete or illegible applications will not be processed. Clearly number all attachments to correspond to the question for which the attachment provides a response. Provide company name and, if applicable, year 2000 license number on all attachments. Ensure all forms are properly signed and notarized. Applications filed without payment will not be processed.
DO NOT LEAVE ITEMS BLANK, OR FAIL TO INCLUDE REQUIRED ATTACHMENTS.

APPLICATION STATUS

- Check one: New Application Renewal Application (Year 2000 License # 5902MB)
- Check one: Application for a First Mortgage Banker license
Application for a First Mortgage Broker license
Application for BOTH a First Mortgage Banker AND Broker license

NAME AND IDENTIFICATION OF APPLICANT

Name of Applicant: FINANCIAL RESOURCES + ASSISTANCE, INC OF THE LAKES REGION

3a. Will applicant do business under a trade name? NO If "yes", provide trade name and attach copy of trade name registration issued by NH Secretary of State. Trade name listed below MUST match registration issued by Secretary of State.

Trade Name: _____

3b. Applicant's federal tax ID number 02-0433840

BONDING

7. If "broker" or "banker and broker" is selected in item 2. on page 1, attach ORIGINAL \$20,000 surety bond or ORIGINAL continuation certificate. (Photocopies are NOT acceptable) Provide expiration date of bond 12/31/01 (Must not expire prior to 12/31/2001)

Provide name and telephone number of insurance agent: INSURANCE OPTIONS INC (603) 279-7417
(Name) (KATHY DAVIE) (Telephone)

APPLICANT'S LEGAL STATUS

3. Applicant is a: (check one) Corporation Individual _____ Partnership _____
Association _____ Limited Liability Company _____
Other (specify) _____

A. If a corporation, provide date and state of incorporation, and attach a copy of Certificate of Incorporation issued by the State in which the applicant is incorporated.

State: NH Date: 5/18/89

B. If applicant is not a NH entity, attach a copy of certificate of registration as a foreign entity issued by the NH Secretary of State. (NH Secretary of State, Corporate Division - Phone: 603-271-3244)

N.H. AGENT

If applicant's principal place of business is NOT in New Hampshire, a New Hampshire agent must be designated:

Name of Agent: NA Telephone: _____

Street Address of Agent (N.H.): _____

Mailing Address of Agent: _____

OWNERSHIP AND MANAGEMENT

1. Attach a list of the names, business and residence addresses and titles of the applicant's principal shareholders (10% or more), senior officers (senior vice presidents and higher) and directors of a corporate applicant; the general partners of a general partnership; the general and limited partners of a limited partnership; the members of a limited liability company; or the trustees of a business trust.

SCOTT FARAH, BUS ADDRESS SAME AS COMPANY - PRESIDENT, 100%, OWNER
RESIDENCE: [REDACTED]

Attach resumes or similar documents which indicate the lending and/or loan brokering experience of the applicant organization and the organization's officers and senior employees (senior vice president and higher). Publicly traded corporate applicants or the subsidiaries of publicly traded corporations, need not submit resumes.

SEE ATTACHED RESUME

EXPERIENCE AND PAST CONDUCT

12. Attach a list of all current lending and/or loan brokering licenses issued by any other state. Provide name of state, license type, license number and expiration date for each license held. *IN, MA, MI, NH, NC, NM, OK, RI*
SEE LICENSES ATTACHED WA, TN, WI, PA
13. Has applicant, or any of its owners, directors, partners, members, officers (Sr VP & higher) or managers ever had a lending or loan brokering license revoked, suspended or denied by this or any other state, or been the subject of any formal disciplinary proceeding? Yes _____ No If yes, provide full details on a separate sheet.
14. Has the applicant or any of its owners, directors, partners, members, officers (Sr VP & higher) or managers ever been convicted of a felony? Yes _____ No If "yes", furnish complete details, including dates, location, docket number, nature of crime, penalties, etc. on a separate sheet.

FINANCIAL CONDITION

(COMPLETE ONLY IF APPLYING FOR A MORTGAGE BANKER LICENSE)

15. Financial Statements: Mortgage banker applicants must demonstrate a minimum net worth of \$100,000, in cash and marketable securities only, to qualify for a license. Attach the following:
- A. Copies of the following that are prepared by a public accountant, certified public accountant or applicant's financial officer (applicant's financial officer must provide signed and notarized statements):
1. Balance sheet, as of most recent quarter end
 2. Cash flow statement, as of most recent quarter end
 3. Income statement, as of most recent quarter end
- B. Individuals, sole-proprietors, partnerships, limited-liability companies and corporations with 20 or fewer shareholders must attach most recent federal tax returns.
- C. Publicly traded corporations, and wholly-owned subsidiaries of publicly traded corporations, may submit copies of their, or their parent corporation's, most recent SEC 10K and 10Q forms in lieu of financial statements required by A. above.

OPERATIONS

16. (a) How are loans funded? *The majority of all loans are funded by the entities that are purchasing them, at the closing table.*
- (b) Name(s) loans are closed in? *The majority of all loans are closed in the name of the funding source. The balance are closed in our name.*
- (c) Brokers - attach a list of all correspondent lenders that make NH loans (include company name, address, telephone #'s and contact person for each)
List attached
- Bankers - attach a list of all correspondent brokers that broker NH loans (include company name, address, telephone #'s and contact person for each).
List attached - NA

-
16. (d) Describe wholesale lending activities (if applicable)

NA

17. If applicant does not maintain a New Hampshire office, list all offices of applicant where loan applications relating to NH real estate are processed. Give both street and mailing addresses. Attach additional sheet if necessary. (All such offices must be licensed)

MAIN OFFICE ONLY

18. If applicant does not maintain a New Hampshire office, list all offices of applicant where loan applications relating to NH real estate are underwritten. Give both street and mailing addresses. Attach additional sheet if necessary. (All such offices must be licensed)

NA

19. If applicant does not maintain a New Hampshire office, list all offices of applicant where loans secured by NH real estate are serviced. Give both street and mailing addresses. Attach additional sheet if necessary (All such offices must be licensed)

NA

20. If loans secured by NH real estate are serviced by third parties, provide for each third party servicer (1) the name of the servicer, (2) the servicer's mailing and street address, (3) the servicer's telephone number and (4) the name and title of a senior officer: (Attach additional sheet if necessary)

NA

DO NOT COMPLETE ITEMS 21 AND 22 UNLESS YOU ARE APPLYING AS A MORTGAGE BANKER AND ARE REQUESTING AUTHORIZATION TO ISSUE RATE LOCK COMMITMENTS

RATE LOCK COMMITMENTS

21. If "banker" is checked in item 2. on page 1, are you requesting authorization to issue Rate Lock Commitments? NO
(If "yes", complete item 22)
22. Attach copies of Federal National Mortgage Association ("FNMA"), Federal Home Loan Mortgage Corporation ("FHLMC") and/or Government National Mortgage Association ("GNMA") approvals, and an audited financial statement demonstrating \$500,000 net worth in cash and marketable securities.

OR

If the applicant is a wholly-owned subsidiary of a publicly-traded company, attach the most recent common stock rating available at the time of application demonstrating that the parent corporation's common stock is rated among the four highest categories by Standard and Poor's Corporation, Fitch Investors Service or Valueline Investment Survey; **AND** attach a written commitment from the parent corporation guaranteeing that the parent corporation will protect borrowers from losses resulting from the applicant/subsidiary mortgage banker's failure to honor its rate-lock commitments.

PERSON COMPLETING APPLICATION:

SCOTT FARAH
(Name)

PRES
(Title)

(603) 279-1133
(Direct Telephone No.)

PO BOX 1158, MEREDITH, NH 03253
(Mailing Address)