



State of New Hampshire

RECEIVED Banking Department

MAY 24 1999

56 Old Suncook Road
Concord, New Hampshire 03301

Telephone: (603) 271-3561

BANKING DEPT

FORM 398-A-2
**APPLICATION FOR SECOND MORTGAGE
HOME LOAN LENDING LICENSE**
License Year: 1999

New and Renewal Application Fees
Principal Office \$250.00 Each Branch Office \$250.00

Make Check Payable To:
"STATE OF NEW HAMPSHIRE"

| FOR OFFICE USE ONLY | |
|---------------------|--|
| Ck. # | <u>23368</u> |
| Amt. \$ | <u>250.00</u> |
| Rec'd By | [Redacted] Date <u>5/24/99</u> |
| Entered By | [Redacted] Date <u>5/27/99</u> |
| App. Complete | [Redacted] Date <u>6/15/99</u> |
| Approved By | [Redacted] Date <u>6/15/99</u> |
| Pr. Lic. # | <u>5903</u> Date Mailed <u>6/16/99</u> |

INSTRUCTIONS :FULLY complete all items. Incomplete 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, 1998 license number on all attachments. Ensure all forms are properly signed and notarized. Applications filed without payment will not be processed.

APPLICATION STATUS

1. Check one: New Application Renewal Application (1998 License # 5903-MHL)

NAME AND IDENTIFICATION OF APPLICANT

2. Name of Applicant: Financial Resources + Assistance Inc.

2a. 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 _____

2b. Applicant's federal tax ID number 02-0433840

PRINCIPAL PLACE OF BUSINESS AND BRANCH LOCATIONS

3a. Applicant's principal place of business (MUST be licensed - \$250 license fee must be enclosed) :

15 Northview Drive, Meredith NH 03253
(Street Address) (City) (State) (Zip)

PO Box 1158 Same
(Mailing Address) (City) (State) (Zip)

(603) 279-1133 (603) 279-5912
(Telephone) (Fax)

3b. Other Offices:

ALL NH offices must be licensed (enclose \$250.00 fee for each NH office). If no NH offices, list all out-of-state locations where NH loans are processed, underwritten and/or serviced (enclose \$250.00 fee for each listed out-of-state location). Provide street and mailing addresses, name of manager, direct telephone number and fax number for each listed location. (Attach a separate sheet if necessary)

Address Manager Telephone Fax

EXECUTIVE OFFICER

4. President, Chief Executive Officer or Senior Partner of Applicant:

Name Scott D. Farah Title: President

Business Address: Same as above
(Street) (City) (State) (Zip) (Direct Line Telephone)

Mailing Address: _____
(Street) (City) (State) (Zip)

E-Mail Address: _____

WORLD WIDE WEB ADDRESS

5. Provide applicant's World Wide Web address, if applicable. If no world wide web address, indicate by stating "N/A", "None", "Not Applicable" or similar statement

http://www. cyberportal.net/fra

BONDING

6. Attach original \$5,000 surety bond or original continuation certificate for each licensed location. Provide expiration date of bond 12/31/99 (Must not expire prior to 12/31/99) Provide name and telephone number of insurance agent:

Rowley Agency, Inc (Name) (603) 224-2562 (Telephone)

APPLICANT'S LEGAL STATUS

7. 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 State.

(NH Secretary of state, Corporate Division - Phone: 603-271-3244)

N.H. AGENT

8. 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

9. 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 D. Garate,

President
100% owner
bus address same as Company. Residence - [redacted]

10. 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.

EXPERIENCE AND PAST CONDUCT

11. Attach a list of current lending and/or brokering licenses by any other state. Provide name of state, license type, license number and expiration date for each license held.
12. 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.
13. 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

14. Financial Statements: Applicants must demonstrate that \$25,000 is available for use at each location to be licensed, or that \$25,000 has been invested in second mortgage loans at each location to be licensed. Applicants must submit the following:
- A. Submit 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.

15. OPERATIONS

- (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 balances are closed in our name.*
- (c) Brokers - list all correspondent lenders that make NH loans (include company name, address, telephone #'s and contact person for each)
List attached.
- (d) Describe wholesale lending activities (if applicable)
NA

16. 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

17. 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.)

main office only

18. 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.)

main office only

19. 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

PERSON COMPLETING APPLICATION:

Scott Farah
(Name)

President
(Title)

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

same as above

Mailing Address

AFFIRMATION

I subscribe and affirm, under penalty of perjury, that the statements made in this application, including statements made in any accompanying papers, have been examined by me and to the best of my knowledge and belief are true, correct and complete, and that I am duly authorized to execute this affirmation.

Date: 5/20/99

Financial Resources Inc
(Applicant)

By 

Title President

State of _____)
County of _____) SS.

Personally appeared the above named applicant Financial Resources Inc.
by Scott Farah its President
(Name) (Title)

hereunto duly authorized, and acknowledged that the foregoing statements by him/her subscribed to be true.

Dated at Meredith NH before me, 
Michelle S. Botkin
Justice of the Peace/Notary Public

this 20 day of May 1999.

MICHELLE S. BOTKIN, Notary Public
My Commission expires December 18, 2001

Applications must be received by the Banking Department by DECEMBER 1, 1998.

The Bank Commissioner may take up to 120 days to approve or deny an application. Application fees are NON-REFUNDABLE.



State of New Hampshire

Banking Department

169 Manchester Street
Concord, New Hampshire 03301

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

A. ROLAND ROBERGE
BANK COMMISSIONER
ALLAN N. JEANNOTTE
DEPUTY BANK COMMISSIONER
PAUL E. BOURGAULT
CHIEF BANK EXAMINER

RSA 398-A Second Mortgage Home Loan Surety Bond

Bond Number 8064386

Financial Resources & Assistance
of the Lakes Region, Inc.

(Name of Licensee)

, of 15 Northview Drive, Meredith

(Principal Business Address)

a Corporation, established under and by virtue of
(Corporation, Individual, Partnership, etc.)

the laws of the State of New Hampshire 03253 as principal,

and Fidelity and Deposit Company of Maryland

(Name and Address of Surety Company)

as surety, are bound to the State of New Hampshire and people of the State of New Hampshire for the term beginning at 12:00 A.M. on the 31st day of December, 19 98 and ending the 31st day of December, 19 99 in the sum of Five Thousand Dollars, to be paid to the State of New Hampshire after due notice and hearing in accordance with the provisions of Chapter 541-A of the New Hampshire Revised Statutes Annotated, or to any person or persons who may have obtained final judgment from a court of competent jurisdiction in a cause of action against said principal under the provisions of Chapters 398-A, 358-K, 399-B, 399-C or 399-E New Hampshire Revised Statutes Annotated or common law.

The Condition of this surety bond is such that if the above Financial Resources & Assistance
of the Lakes Region, Inc. of
(Name of Principal/Licensee)

15 Northview Drive, Meredith, NH 03253 who is or may be licensed to engage in a second
(Principal Business Address)

mortgage home loan business under the provisions of Chapter 398-A of the New Hampshire Revised Statutes Annotated, shall conform to and abide by each and every provision of said law and to each and every provision of Chapters 358-K, 399-B, 399-C and 399-E of the New Hampshire Revised Statutes Annotated, shall pay to the State of New Hampshire after due notice and hearing in accordance with the provisions of Chapter 541-A of the New Hampshire Revised Statutes Annotated, and to any person or persons who may have obtained final judgment naming said principal from a court of competent jurisdiction, any and all moneys that may become due or owing to the State of New Hampshire and to such person or persons from the principal hereunder, under and by virtue of the provisions of the laws previously enumerated herein, then this obligation shall be void; otherwise it shall remain in full force and effect.

The Surety hereunder hereby agrees to provide written notification of the cancellation of this bond to the Bank Commissioner of the State of New Hampshire no later than 10 days prior to such cancellation.

Dated: December 31, 1998

FINANCIAL RESOURCES & ASSISTANCE
OF THE LAKES REGION, INC.

(Name of Licensee)

[Redacted]

Witness

By:

[Redacted]
(Signature)

Title: Scott D. Farch, President

[Redacted]

Witness

FIDELITY AND DEPOSIT COMPANY OF MARYLAND

(Signature)

[Redacted]

Attorney in fact: William Ver Planck

Power of Attorney
FIDELITY AND DEPOSIT COMPANY OF MARYLAND

HOME OFFICE, BALTIMORE, MD

KNOW ALL MEN BY THESE PRESENTS: That the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, a corporation of the State of Maryland, by C. M. PECOT, JR., Vice-President, and C. W. ROBBINS Assistant Secretary, in pursuance of authority granted by Article VI, Section 2, of the By-Laws of said Company, which are set forth on the reverse side hereof and are hereby certified to be in full force and effect on the date hereof, does hereby nominate, constitute and appoint Daniel E. Church, Paula J. Cantara, Bruce H. Langley, William Ver Planck, John P. Hughes, John M. Harbottle and John P. Timmeny, all of Concord, New Hampshire, EACH..... its true and lawful agent and Attorney-in-fact, to make, execute, seal and deliver, for and on its behalf as surety, and as its act and deed: any and all bonds and undertakings.....

And the execution of such bonds or undertakings in pursuance of these presents, shall be as binding upon said Company, as fully and amply, to all intents and purposes, as if they had been duly executed and acknowledged by the regularly elected officers of the Company at its office in Baltimore, Md., in their own proper persons. This power of attorney revokes that issued on behalf of Daniel E. Church, etal, dated, January 30, 1992.

The said Assistant Secretary does hereby certify that the extract set forth on the reverse side hereof is a true copy of Article VI, Section 2, of the By-Laws of said Company, and is now in force.

IN WITNESS WHEREOF, the said Vice-President and Assistant Secretary have hereunto subscribed their names and affixed the Corporate Seal of the said FIDELITY AND DEPOSIT COMPANY OF MARYLAND, this 7th day of April, A.D. 1992

ATTEST:



FIDELITY AND DEPOSIT COMPANY OF MARYLAND

[Redacted Signature]

Assistant Secretary

By

[Redacted Signature]

Vice-President

STATE OF MARYLAND
CITY OF BALTIMORE (SS:

On this 7th day of April, A.D. 1992, before the subscriber, a Notary Public of the State of Maryland, in and for the City of Baltimore, duly commissioned and qualified, came the above-named Vice-President and Assistant Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, to me personally known to be the individuals and officers described in and who executed the preceding instrument, and they each acknowledged the execution of the same, and being by me duly sworn, severally and each for himself deposed and saith, that they are the said officers of the Company aforesaid, and that the seal affixed to the preceding instrument is the Corporate Seal of said Company, and that the said Corporate Seal and their signatures as such officers were duly affixed and subscribed to the said instrument by the authority and direction of the said Corporation.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my Official Seal, at the City of Baltimore, the day and year first above written.



CAROL J. FADER

Notary Public Commission Expires August 1, 1992

CERTIFICATE

I, the undersigned, Assistant Secretary of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND, do hereby certify that the original Power of Attorney of which the foregoing is a full, true and correct copy, is in full force and effect on the date of this certificate; and I do further certify that the Vice-President who executed the said Power of Attorney was one of the additional Vice-Presidents specially authorized by the Board of Directors to appoint any Attorney-in-Fact as provided in Article VI, Section 2, of the By-Laws of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND.

This Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of the FIDELITY AND DEPOSIT COMPANY OF MARYLAND at a meeting duly called and held on the 16th day of July, 1969.

RESOLVED: "That the facsimile or mechanically reproduced signature of any Assistant Secretary of the Company, whether made heretofore or hereafter, wherever appearing upon a certified copy of any power of attorney issued by the Company, shall be valid and binding upon the Company with the same force and effect as though manually affixed."

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed the corporate seal of the said Company, this 31st day of December, 1998

040-0850

[Redacted Signature]

Assistant Secretary

EXTRACT FROM BY-LAWS OF FIDELITY AND DEPOSIT COMPANY OF MARYLAND

"Article VI, Section 2. The Chairman of the Board, or the President, or any Executive Vice-President, or any of the Senior Vice-Presidents or Vice-Presidents specially authorized so to do by the Board of Directors or by the Executive Committee, shall have power, by and with the concurrence of the Secretary or any one of the Assistant Secretaries, to appoint Resident Vice-Presidents, Assistant Vice-Presidents and Attorneys-in-Fact as the business of the Company may require, or to authorize any person or persons to execute on behalf of the Company any bonds, undertakings, recognizances, stipulations, policies, contracts, agreements, deeds, and releases and assignments of judgements, decrees, mortgages and instruments in the nature of mortgages, . . . and to affix the seal of the Company thereto."



State of Michigan



License No. FL-1361

Department of Consumer and Industry Services
Financial Institutions Bureau
Lansing, Michigan

This is to certify that, effective as of September 24, 1998

FINANCIAL RESOURCES & ASSISTANCE OF THE LAKES REGION, INC.
15 Northview Drive
Meredith, NH 03253

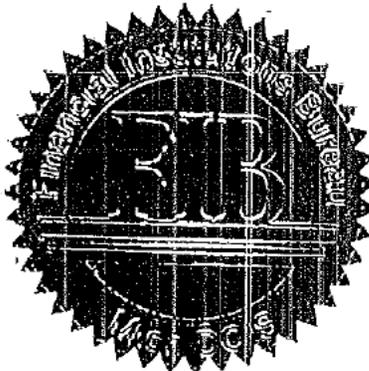
is hereby duly LICENSED as a Mortgage Broker in the State of Michigan in accordance with the provisions of Act No. 173, Public Acts of 1987, as amended, the Mortgage Brokers, Lenders, and Servicers Licensing Act. This License is not transferable or assignable.



Commissioner Patrick M. McQueen

September 28, 1998

Date



This certificate shall be conspicuously displayed in the place of business specified herein.



11. Financial Resources Inc 5903-MHL

MORTGAGE BROKER REGISTRATION CERTIFICATE



NO. B-1170

Main Office

Effective : 10/1/96

STATE OF NORTH CAROLINA

The North Carolina Commissioner of Banks certifies that

Financial Resources & Assistance of the Lakes Region, Inc.
a Corporation
15 Northview Drive
Meredith, NH 03253

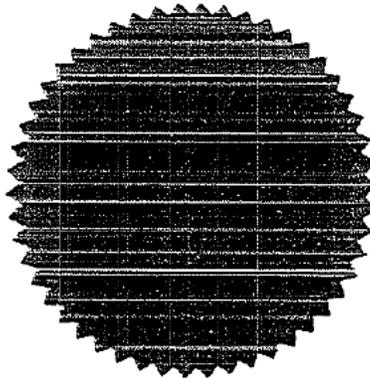
has complied with the registration requirements of G.S. 53-237 and can
operate its business as a mortgage broker.

This certificate is valid only at the above location and may not be
transferred.

Witness my signature and Official Seal.



Hal D. Lingerfelt
Commissioner of Banks



THIS CERTIFICATE SHALL BE PROMINENTLY POSTED AT ALL TIMES.

5903-MHL

Financial Resources, Inc

11.

STATE OF OKLAHOMA



OFFICE OF THE ADMINISTRATOR OF THE DEPARTMENT OF CONSUMER CREDIT

1998-2000

MORTGAGE BROKER LICENSE

1998-2000

THIS LICENSE MUST BE PROMINENTLY DISPLAYED AT LOCATION LISTED BELOW

LICENSE NUMBER MB 116

FINANCIAL RESOURCES & ASSISTANCE, INC.
3908 SOUTH 93RD EAST AVENUE
TULSA OK 74145

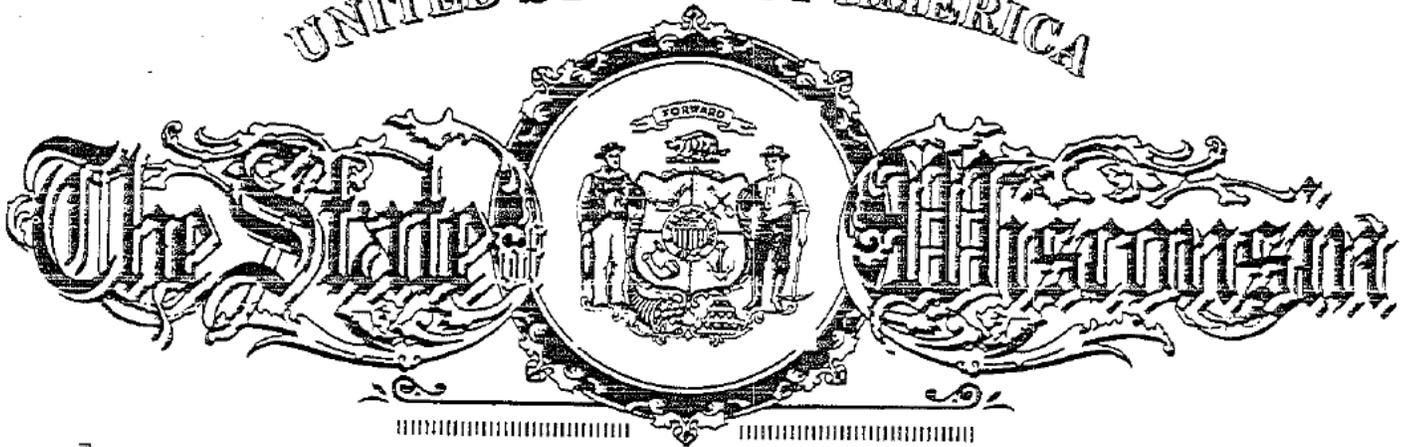


Administrator

Expires 12-31-2000
<http://www.state.ok.us/~okdcd/>

THIS LICENSE NOT TRANSFERABLE OR ASSIGNABLE

UNITED STATES OF AMERICA



DEPARTMENT OF FINANCIAL INSTITUTIONS

SCOTT D. FARAH

having complied with the requirements set forth under Section 224.72 of the Wisconsin Statutes, is hereby granted a certificate of registration as a

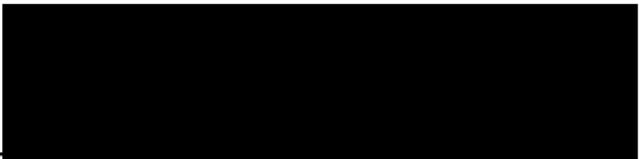
LOAN ORIGINATOR

in accordance with and subject to the provisions of said Section 224.72 and all acts amendatory thereto.

A loan originator may transfer employment to another registered mortgage banker by completing an application form prescribed and provided by the department, and paying the transfer fee specified under 224.72(8)(d).

This license cannot be assigned, and having complied with the requirements set forth under Section 224.72(7), continues in effect until terminated.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department of Financial Institutions. Done at my office in the City of Madison, WI this 21st day of September, 1998.



RICHARD L. DEAN, SECRETARY
DEPARTMENT OF FINANCIAL INSTITUTIONS

License No. 8187

14A

FINANCIAL RESOURCES, INC.
1158 Northview Drive
Meredith, NH 03253

BALANCE SHEET
As of September 30, 1998

CURRENT ASSETS

| | |
|---|-------------------|
| Cash on Hand and in Banks | \$ <u>29,942</u> |
| Notes, Loans and Other Accounts Receivable | <u>614,000</u> |
| Real Estate | <u>0</u> |
| Equipment | <u>45,000</u> |
| Stocks | <u>0</u> |
| Other Assets | <u>0</u> |
| TOTAL ASSETS | \$ <u>688,942</u> |

CURRENT LIABILITIES

| | |
|--|-------------------|
| Notes, Loans and Other Accounts Payable | \$ <u>42,600</u> |
| Real Estate Mortgages | <u>0</u> |
| Due on Equipment | <u>4,100</u> |
| Borrowed or Due on Stocks and Bonds | <u>0</u> |
| Other Debts & Liabilities | <u>0</u> |
| TOTAL LIABILITIES | \$ <u>46,700</u> |
| TOTAL ASSETS | \$ <u>688,942</u> |
| TOTAL NET WORTH | \$ <u>642,242</u> |

14A.

FINANCIAL RESOURCES, INC.

1158 Northview Drive
Meredith, NH 03253

INCOME STATEMENT
1/1/98 Through 9/30/98

INCOME/EXPENSE

INCOME

GROSS INCOME \$558,270

EXPENSES

| | |
|-------------------------|------------|
| 10-99 | \$ 264,121 |
| Advertising | 26,288 |
| Insurance | 19,981 |
| Leases | 5,177 |
| Legal | 2,870 |
| Payroll | 78,458 |
| Post | 45,592 |
| Supplies/Office Expense | 51,872 |
| Taxes | 33,125 |
| Telephone | 8,696 |
| Utilities | 6,812 |

TOTAL EXPENSES \$ 542,992

TOTAL INCOME/EXPENSES \$ 15,278

14A

FINANCIAL RESOURCES, INC.
15 Northview Drive
Meredith, NH 03253

STATEMENT OF CASH FLOWS
January 1, 1998 Through September 30, 1998

Cash Flows From Operating Activities

| | |
|---|-----------|
| Net Income | \$15,278 |
| Net Cash Provided by Operating Activities | 15,278 |
| Purchase of Equipment for Cash | (6,100) |
| New Cash Used | (6,100) |
| Net Increase in Cash | 9,178 |
| Cash at Beginning of Year | \$ 20,764 |
| Cash at September 30, 1998 | \$ 29,942 |

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

5/29/99
Date application received

Checklist SECOND MORTGAGE HOME LOAN LENDER

REVISED 11/98

LATE
RENEWAL

| | | | | | |
|-----|---|---|-----|--------------------------------------|---------------------------|
| #1 | Application Status indicated | | NEW | <input checked="" type="radio"/> | <input type="radio"/> |
| #2 | Name: <u>Financial Resources & Assistance of the Lakes Region</u> | | | | |
| #2a | Trade Name: _____ | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | Copy of Trade Name registration issued by the NH Secretary of State included? The name requested must match the registration certificate! | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| #2b | Applicant's Federal Tax ID number indicated | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| #3a | Applicants principal place of Business address, phone #, fax # | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | Mailing address | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | \$250 FEE PAID | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| #3b | Additional Offices | Business address, Manager, phone #, fax # | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | Mailing address | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | \$250 FEE x ___ # Offices | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| #4 | Executive Officer, Business address, Mailing address, telephone number indicated | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| #5 | World Wide Web address indicated | | | YES <input checked="" type="radio"/> | N/A <input type="radio"/> |
| #6 | Original \$5,000 Surety Bond or original continuation certificate for each licensed location | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | Expiration date of bond correct (12/31/XX) | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | Insurance Agent listed with telephone # | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| #7 | Applicant's Legal Status: Individual, Corporation, Partnership, LLC, _____ | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | State of Registration _____ Date _____ | | | | |
| | Copy of home state registration certificate provided | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | If foreign entity, Copy of Foreign Registration issued by NH Secretary of State provided | | | YES <input checked="" type="radio"/> | N/A <input type="radio"/> |
| #8 | If foreign entity, NH Agent designated | | | YES <input checked="" type="radio"/> | N/A <input type="radio"/> |
| #9 | List of principal shareholders, directors, senior officers, and partners with business and residence addresses, titles for each person | ALL | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| #10 | Resumes of directors and senior officers provided for each person | ALL | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | Publicly traded companies or subsidiaries provide SEC 10-K report and 10-Q report in lieu | | | YES <input checked="" type="radio"/> | N/A <input type="radio"/> |
| #11 | List of current lending or broker licenses issued by other states indicating state, license type, license number and expiration date for each license | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| #12 | Lending or loan brokering license revoked, suspended or denied by NH or any other state, or any formal disciplinary proceedings? | | | YES <input checked="" type="radio"/> | NO <input type="radio"/> |
| | If answered YES, are complete details provided (Refer to Kerry) | | | YES <input checked="" type="radio"/> | N/A <input type="radio"/> |

1st Alt Banker
Banker App.
L-C # 5902-MB

SBK

| | | | |
|-------|---|-----|--------|
| #13 | Conviction of a felony | YES | NO |
| | If answered YES, are complete details provided including dates, location, docket number, nature of the crime, and penalties (Refer to Kerry) | YES | N/A NO |
| #14 | Financial Statements must have \$25,000 available or invested in loans for each location | YES | NO |
| A | Audited Balance Sheet, Income Statement, Cash Flow as of most recent quarter end OR Statements prepared by the applicant's financial officer must sign and notarized | YES | N/A NO |
| B | Individuals, sole proprietors, partnerships, limited liability companies and corporations with 20 or less shareholders must provide a copy of the most recent federal business tax return ie. 1120, 1120S, K-1, other | YES | N/A NO |
| C | Publicly traded corporation or subsidiary If YES, submit copies of the parent corporation's most recent SEC 10-K report and 10-Q report in lieu of items requested in #15 A | YES | N/A NO |
| #15 a | Narrative provided | YES | NO |
| b | List of names loans closed in provided | YES | NO |
| c | Brokers provide list of correspondent lenders with company name, address, telephone # and contact person | YES | N/A NO |
| | List reviewed for proper license. | YES | NO |
| | Is an Affirmation required? | YES | NO |
| d | Narrative of wholesale activities | YES | N/A NO |
| #16 | Does applicant have a New Hampshire office? If NO, list all offices that process NH loans. Each office must be licensed | YES | NO |
| #17 | Does applicant have a New Hampshire office? If NO, list all offices that underwrite NH loans. Each office must be licensed | YES | NO |
| #18 | Does applicant have a New Hampshire office? If NO, list all offices that service NH loans. Each office must be licensed | YES | NO |
| #19 | Are NH loans serviced by third parties? If YES, provide list of Servicer, mailing and street address, phone #, name & title senior officer (Each SERVICER must be registered) | YES | NO |
| | Person completing application with mailing address completed? | YES | NO |
| | Affirmation, signed, dated, and notarized? | YES | NO |

#####

Bond

SECOND MORTGAGE HOME LOAN

| | | |
|--|-----|----|
| \$5,000 Surety Bond (one per licensed location) Expires 12/31/XX | YES | NO |
| Bond completed, Dated, accepted & signed by applicant, signed by bonding agent | YES | NO |

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Personal Background and Financial Disclosure Statement

NEW RENEWAL

NEW applicants complete pages 3 - 6 as instructed

RENEWAL applicants complete page 1 only, if NO changes since previous renewal

RENEWAL applicants complete pages 3 thru 6, if there are any changes since the previous license

Authorization Release Form

N/A

Completed for ALL NEW Applicants, Officers, Owner, Directors, Partners, Trustees, Members

Make copy and send to Department of Safety Criminal Investigation

Call for credit report

| | | |
|--|-----|----|
| Credit report review. Any credit issues? | YES | NO |
|--|-----|----|

Set up CONFIDENTIAL file - Including Tax Return, Credit Report, and Criminal Report

#####



State of New Hampshire

Banking Department

169 Manchester Street
Concord, New Hampshire 03301

Telephone: (603) 271-3561

FAX: (603) 271-1090

A. ROLAND ROBERGE
BANK COMMISSIONER
ALLAN N. JEANNOTTE
DEPUTY BANK COMMISSIONER
JEAN M. DOBBINS
CHIEF BANK EXAMINER

Date: 5/6/99

From: LORRAINE BAILEY

To: SUZANNE ROBINSON/FINANCIAL RESOURCES INC

Note: PER OUR TELEPHONE CONVERSATION ON THIS DATE, ENCLOSED IS THE CHECK THAT WE RECEIVED WITHOUT AN APPLICATION. PLEASE RESUBMIT IT WITH YOUR SECOND MORTGAGE APPLICATION.

To get this to you promptly, I am mailing the enclosed without a formal letter. If you have any questions, please feel free to call me. Thank you.

This document contains multiple security features. See reverse side of this note.

FINANCIAL RESOURCES, INC.
15 NORTHVIEW DRIVE
MEREDITH, NH 03253



0023368

25 Jan '99

PAY TO THE ORDER OF State of New Hampshire

*****250.00

Two Hundred Fifty and 00/100***** DOLLARS

State of New Hampshire
Banking Department
169 Manchester Street
Concord, NH 03301



MP

MEMO





State of New Hampshire

Banking Department

LICENSE CONTACTS

56 Old Suncook Road
Concord, New Hampshire 03301

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

KATHLEEN L. BELANGER
ADMINISTRATOR, REGULATION & LICENSING
RAYMOND A. HEROUX
CONSUMER CREDIT ADMINISTRATOR

A. ROLAND ROBERGE
BANK COMMISSIONER
ALLAN N. JEANNOTTE
DEPUTY BANK COMMISSIONER
JEAN M. DOBBINS
CHIEF BANK EXAMINER

Enclosed is your 1999 license.
Please complete this form and return it to
Linda Austin at the above address.

LICENSING

Licensee Name: _____

License # (s) : 5903 - MHL

License Type: 2nd Mtg - home loan lender

Contact Person: Scott Jarab Title: Pres

Direct Mailing Address: _____

FINANCIAL RESOURCES, INC.
15 NORTHVIEW DRIVE
P.O. BOX 1158
MEREDITH, NH 03253

Direct Telephone No.: _____

(603) 279-1133

ANNUAL REPORT FILING

Contact Person: Scott Jarab Title: _____

Direct Mailing Address: _____

Direct Telephone No.: _____

CONSUMER INQUIRIES

Contact Person: Scott Jarab Title: _____

Direct Mailing Address: _____

Direct Telephone No.: _____