FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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l	OMB APPRO	VAL							
	OMB Number:	3235-0287							
l	Estimated average burden								
l	hours per response:	0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* WISH BARRY N					2. Issuer Name and Ticker or Trading Symbol OCWEN FINANCIAL CORP [OCN]								(Check all appoint of the Check all appoints of the Check al		olicable)		Person(s) to Issuer 10% Owner				
(Last) 1675 PAI	-	rst) (H LAKES BLVD	Middle)				of Earli	est Tran	saction (N	/lonth/l	n/Day/Year)						Officer (give title below)		Other (specify below)		
(Street) WEST PABEACH (City)	FI		33401 Zip)		4. 11	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	Forn	or Joint/Group Filing (Check Applicable In filed by One Reporting Person In filed by More than One Reporting Ison					
		Tabl	e I - Noi	n-Deriv	ative	Se	curit	es Ac	quired	, Dis	posed o	f, o	r Ben	efic	ially	Owne	ed				
Date				2. Trans Date (Month/		Execution Date,		Code	Transaction Dispose Code (Instr. 5)		ities Acquired (A) o d Of (D) (Instr. 3, 4					ities icially d Following	6. Owner Form: Di (D) or Inc (I) (Instr.	rect lirect	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount		(A) or (D)	Pric	e	Transa	ted action(s) 3 and 4)			(Instr. 4)	
Common Stock 02/1					3/2005	005		S		1,000		D	\$8	.04 7,7		772,601	I		By Wishco		
Common Stock 0:					2/2005	2005		S		1,000		D	\$8.	.018	7,7	771,601	I		By Wishco		
Common Stock 02/23					3/2005	2005			S		1,000		D	\$8.	.029	7,770,601		I		By Wishco	
		Та									sed of, onvertib					wned					
1. Title of Derivative Security (Instr. 3)	e Conversion or Exercise Price of Derivative Security Date (Month/Day/Year) Date (Month/Day/Year) If any (Month/Day/Year) Rescution Date, if any (Month/Day/Year) Rescution Date, if any (Month/Day/Year)		Transa Code (Expirati (Month/l	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date		Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3 nount mber	ıt r		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form Direc or Ind (I) (In	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)				

Explanation of Responses:

/s/ Paul A. Koches, Attorney-

** Signature of Reporting Person

in-Fact

<u>02/23/2005</u>

Date

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).