FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

- 1								
	OMB APPROVAL							
	OMB Number:	3235-0104						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Shepro William B			Date of Event equiring Staten Month/Day/Year 5/18/2004		3. Issuer Name and Ticker or Trading Symbol OCWEN FINANCIAL CORP [OCN]							
(Last) 1675 PALM B	(First) EACH LAKES	(Middle)	J, 13, 2 00 .			Relationship of Reporting Pers leck all applicable) Director X Officer (give title	10% Owner Other (specify		5. If Amendment, Date of Original Filed (Month/Day/Year) 05/20/2004			
(Street) WEST PALM BEACH (City)	FL (State)	33401 (Zip)				Senior Vice Pres	below) dent		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						nt of Securities ally Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stock	(42,875(1)	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable Expiration Date (Month/Day/Year)			ate	Underlying Derivative Security (Instr. 4) Comor Ex		4. Conve	ercise Form:		6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiration Date	n Title		Amount or Number of Shares	Derivative Security		or Indirect (I) (Instr. 5)		

Explanation of Responses:

1. The original Form 3 filed on 5/20/2004 reported an incorrect initial balance.

/s/ Teresa L. Denoncourt, Attorney-in-Fact 03/01/2005

** Signature of Reporting Person Date

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

- * If the form is filed by more than one reporting person, see Instruction 5 (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).

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.