

			UNITED STATES SECURITIES AND EXCHANGE COMMISSION						OMB APPROVAL								
FORM 4				Washington, D.C. 20549						OMB Number: 3235-0287 Expires: January 31, 2005  Estimated average burden  hours per response 0.5							
				STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP													
		Check this box if no longer															
subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).  (Print or Type Responses)		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(f) of the Investment Company Act of 1940															
1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol						6. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Wish, Barry Neal				Ocwen Financial Corporation (NYSE:OCN)						X		Director					
(Last)		(First)		(Middle)		3. IRS or Social Security Number of Reporting Person (Voluntary)		4. Statement for Month/Year				Officer (give title below)					
								March/2003						Other (specify) below)			
1675 Palm Beach Lakes Blvd																	
(Street)				---				5. If Amendment, Date of Original		7. Individual or Joint/Group Filing (Check Applicable Line)							
West Palm Beach Florida 33401										X Form filed by One Reporting Person							
										Form filed by More than One Reporting Person							
(City)		(State)		(Zip)													
						Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
1. Title of Security (Instr. 3)				2. Trans-action Date		3. Trans-action Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at		6. Owner-ship Form: Direct		7. Nature of Indirect Beneficial-Owner-ship		
				(Month/Day/							End of Month		D) or Indirect				
				Year)		Code V		Amount (A) or (D)		Price		(Instr. 3 and 4)		(I) (Instr. 4)		(Instr. 4)	
Common Stock (1)				03/25/03		S		1,000		D		\$3.2575		I		By Wishco	
Common Stock (1)				03/26/03		S		1,000		D		\$3.274		I		By Wishco	
												8,464,305					
Common Stock (2)				3/25/03				1,000		3.2575							
												109,000				By Foundation	
*Sale in accordance with the Plan.																	

FORM 4 (continued)		Table II Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans-action Date (Month/Day/Year)	4. Transac-tion Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned at End of	10. Owner-ship Form of Derivative Security (Direct (D) or Indirect (I) (Instr. 4))	11. Nature of Indirect Beneficial Owner ship (Instr. 4)
					Date	Expira-						

										Amount or Number of Shares		Month (Instr. 4)		
			Code	V	(A)	(D)	Exer- cisable	tion Date	Title					
<div>1. The reporting person disclaims beneficial ownership as to these shares to the extent he does not have a pecuniary interest therein.</div> <div>2. By Barry Wish Family Foundation, Inc., a Florida corporation, of which Mr. Wish is the President and a Director; the reporting person disclaims beneficial ownership as to these share to the extent he does have a pecuniary interest therein.</div>														
										/s/ Paul A. Koches, Attorney-in-Fact		03/26/03		
										**Signature of Reporting Person		Date		
<div>**Intentional misstatements or omissions of facts constitute Federal Criminal Violations.</div> <div>See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a)</div> <div>Note: File three copies of this Form, one of which must be manually signed.</div> <div>If space provided is insufficient, see Instruction 6 for procedure.</div> <div>Potential persons who are to respond to the collection of information contained</div> <div>in this form are not required to respond unless the form displays a currently valid OMB number.</div>														