**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # 853601 1. Corporation Name

**GOLDOME CREDIT CORPORATION** 

## **FILED** Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90086 011 \*\*\*150.00



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Principal Place of Business Mailing Address						1 <b>100101</b> 10101 011	OR tilfo Dieli ON	101 I)B( 0)B(I	Albit Sibit Albit As	E11 81811 1891
500 CHASE PARK SOUTH P.O. BOX 360958 SUITE 130 HOOVER AL 35236						D	O NOT WRI	TE IN THI	S SPACE	
HOOVER AL 35	244					3. Date Incorporated or Qualifed				
					į	07/29/1982				ļ
2. Principal Pl	ace of Business	2a. Mailing Address			4	. FEI Number			Apr	olied For
21		26				<b>63-0829769</b> Not Appl			Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.					n Donirod		\$8.75 A	dditional .
22					) 5	i. Certifcate of Statu	s Desireu		Fee Rec	quired
City & State		City & State			6	6. Election Campaign Financing \$5.00 May Be				
23		28				Trust Fund Contrib	ution		Added to	Fees
Zíp	Country	Zip	Country	,	8	. This corporation o	wes the curr	ent year In		_
24 25		29 30				Personal Property Tax. Yes No				
	9. Name and Address of Current	Registered Agent			10	). Name and Addre	ss of New F	kegistered	d Agent	
			81	81 Name						
THE PRENTICE HALL CORPORATION SYSTEM, INC			82	Street A	Address (P.O. Box Number is Not Acceptable)					
110 NORTH MAGNOLIA STREET										
TALL	AHASSEE FL 32301		83							
•			84	City			<del></del>		85 Zip C	ode
			1	1				FI	<u> </u>	
* office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligati	f Florida. Such change was ai	uthorized by	the corpo	corporation s b	on submits this state poard of directors. I t	ment for the nereby accer	purpose o of the appo	of changing its pintment as reg	registered jistered
SIGNATURE			· · · · · · · · · · · · · · · · · · ·					DATE		
	Signature, typed or printed name of registered agent	· · · · · · · · · · · · · · · · · · ·	Registered Age	nt signature re	equired when	ADDITIONS/CHAN	GES TO OF		ND DIRECTO	RS IN 12
12.	OFFICERS AND	DELETE	1.1 TITLE	<del></del> 7		ADDITIONS/OFFAIT	020 10 01	TOLKO /	Change	Addition
TITLE	•	bccc,c	1.2 NAME						_ ,	_
NAME	OCCE, ORNICE III		1	T ADDRESS	1910	<i>Pacific</i>	Aven	1 4 10		}
STREET ADDRESS		1000 E			Dalla		5201	~~		
CITY-ST-ZIP	DALLAS TX 75248 VT		1.4 CITY-S 2.1 TITLE	31-ZIP	<u> 14 14 14 14 14 14 14 14 14 14 14 14 14 </u>	SIX	10401		_ Letfange	Addition
TITLE	• •	C) OCCC12	2.7 MAME	ĺ			_			_
NAME:	JUST, RANDY A 5080 SPECTRUM DRIVE, SUITE	1000 E	2.2 NAME	T ADDDCCC	10.0	Pacific .	Aven			ĺ
STREET ADDRESS		1000 €	2.4 CITY-	OT 710	<b>1410</b>	as TK	15 20	10		
CITY-ST-ZIP	DALLAS TX 75248	DELETE	3.1 TITLE	51-ZIP	a)UIU	<u> </u>	, 0 20	<u>,                                     </u>	Change	Addition
TITLE	VS CAMBACNA EDANIC C		3.2 NAME	ļ						_ }
NAME	CAMPAGNA, FRANK C 5080 SPECTRUM DRIVE, SUITE	1000 F		T ADDRESS						
STREET ADDRESS		1000 E								
CITY-ST-ZIP	DALLAS TX 75248	☐ DELETE	3.4. CITY- 4.1 TITLE	51-ZIP	<del></del>				Denange	☐ Addition
TITLE	AS FIGURE TOWNS	LLI Deleve	4. 2 NAME	. 1					_ ,	
NAME	FISHER, JOHNK	1000 E	4.2 CTDE	TADODESS	1910	Pacific	Aven	uo		
STREET ADDRESS	5080 SPECTRUM DRIVE, SUITE	1000 6		T ZID	Dall	les TX	752	~ E		
CITY-ST-ZIP	DALLAS TX 75248	☐ DELETE	4.4 CITY-5 5.1 TITLE	51-ZIP	<del>wull</del>	143 12	10-	<u>- 1</u>	☐ Change	☐ Addition !
TITLE	V POLICIAANI POENIDA		5.2 NAME							_
NAME	HOLLEMAN, BRENDA	T 120		TADORESS						
STREET ADDRESS	500 CHASE PARK SOUTH SUIT	E 130	5.4 CITY-1	ł						i
CITY-ST-ZIP	HOOVER AL 35244	☐ DELETE	6.1 TITLE				<del></del>		Change	Addition
TITLE	V Number 100	C presid	6.2 NAME							_
NAME	HILL, L. JOE	TC 400		T ADDRESS						
STREET ADDRESS	500 CHASE PARK SOUTH, SUI	IE 130	6.3 STREE	,						ł
CITY OF TID			= U + U(1 ) - (		i .					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: