

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **F81390** (9)

1. Corporation Name

SCOTT'S CREDIT CARS, INC.



Principal Place of Business

**4500 WEST COLONIAL
ORLANDO FL 32808**

Mailing Address

**4500 WEST COLONIAL
ORLANDO FL 32808**

2. Principal Place of Business

21 Sub-Agency #
22 City & State

23 Zip

24 Country

2a. Mailing Address

26 State, Apt. #, etc.
27 City & State

28 Zip

29 Country

3. Date Incorporated or Qualified
05/14/1982

3a. Date of Last Report
06/16/1995

4. FEI Number
59-2188695

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**LANIER, SCOTT H.
4500 WEST CONONIAL DR.
ORLANDO FL 32802**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, and the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Scott H. Lanier

Scott H. Lanier

(If Not Registered Agent Signature, please attach)

2-1-96
DATE

12. OFFICERS AND DIRECTORS

1. TITLE	PD	☐ DELETE
2. NAME	LANIER, SCOTT H	
3. STREET ADDRESS	4500 WEST COLONIAL	
4. CITY, ST, ZIP	ORLANDO FL	
5. TITLE	VST	☐ DELETE
6. NAME	LANIER, LESSIE	
7. STREET ADDRESS	4500 WEST COLONIAL	
8. CITY, ST, ZIP	ORLANDO FL	
9. TITLE	D	☐ DELETE
10. NAME	LANIER, LESSIE	
11. STREET ADDRESS	4500 WEST COLONIAL	
12. CITY, ST, ZIP	ORLANDO FL	
13. TITLE		☐ DELETE
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ DELETE
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	☐ Change ☐ Addition
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	☐ Change ☐ Addition
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	☐ Change ☐ Addition
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	☐ Change ☐ Addition
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	☐ Change ☐ Addition
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or person 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 attached amendment with an address.

SIGNATURE:

Scott H. Lanier
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Scott H. Lanier

2-1-96

CR2E034 (12/95)