FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # F81390

1. Corporation Name

SCOTT'S CREDIT CARS, INC.

FILED Jan 27, 1999 8:00am **Secretary of State**

01-27-1999 90061 048 ***150.00



						(135)	
Principal Place of Business Mailing Address							
4500 WEST COLONIAL		4500 WEST COLONIAL					
ORLANDO FL 32808		ORLANDO FL 32808			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualifed		
					05/14/1982		
1 Deinsteal D	lace of Business	2a. Mailing Address			4. FEI Number Applied Fo	or	
2. Principal Place of Business		26			59-2188695 Not Applic	able	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional		
33 Sund, Apr. #, 010.		27			5. Certificate of Status Desired Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	a	
23		28	├ ─ ┐		Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cou	ntry	8. This corporation owes the current year Intangible		
24	25	29	30		Personal Property Tax. Yes No		
-7	9. Name and Address of Curre				10. Name and Address of New Registered Agent	 -	
				81 Name	•		
LANIER, SCOTT H.				82 Street Add	dress (P.O. Box Number is Not Acceptable)		
4500	D WEST CONONIAL DR.						
ORLANDO FL 32802			,		19 17 17 17 18 18 18 18 18 18 18 18 18 18 18 18 18		
				84 City	85 Zip Code'	4.5	
				1	FL '		
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Sta	tutes, the a	bove-named con	poration submits this statement for the purpose of changing its register tion's board of directors. I hereby accept the appointment as registered	red d	
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was ations of Section 607,0505.	s authorized Florida Stati	i by the corporat utes.	tion's board, or directors. Thereby accept the appointment as registered	* ·	
	in larental with, and accept the one	30, 220,011 001,00001		H. LANIE	ER 01-05-99	_	
SIGNATURE	Signature, typed or printed name of vegistered ag	ent and tith if applicable. (NC	TE: Registered	Agent signature requir		-	
12.		NO DIRECTORS	13.	-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12 Addition	
TITLE	PD	☐ DELETE	1.1 TI	TLE	☐ Change ☐ A	NGCHIOH	
NAME	LANIER, SCOTT H		1.2 N	AME			
STREET ADDRESS	ATTAC SUPOT COLONIAL		1.3 \$	TREET ADDRESS	•	-	
CITY-ST-ZIP	ORLANDO FL		1.4 C	TY-ST-ZIP		dditic=	
TITLE	VST	X DELETE	2.1 ∏	TLE	Change A	Addition	
NAME	LANIER, LESSIE		2.2 N	AME			
STREET ADDRESS	ACAD INTOT COLONIAL		2.3 S	TREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL		2,40	OTY-ST-ZIP		u	
TITLE	.D	▲ DELETE	3.1 TI	TLE.	Change A	Addition	
NAME	LANIER, LESSIE		3.2 N	AME		}	
STREET ADDRESS	ATTOT COLONIAL		3.3 S	TREET ADDRESS	The state of the s	ا و	
CITY-ST-ZIP	ORLANDO FL		3.4. 0	CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 Ti	TLE	Change: ₹ / [] A	Addition	
NAME			4, 21	AME			
STREET ADDRESS			4.3 S	TREET ADDRESS			
CITY-ST-ZIP			4.4 C	ITY-ST-ZIP			
TITLE		☐ DELETE			Thange □ A	Addition	
NAME			5.2 N	AME	•		
STREET ADDRESS			5.3 S	TREET ADDRESS		.	
			5.4 C	ITY-ST-ZIP	·		
CITY-ST-ZIP		☐ DELETE			☐ Change ☐	Addition	
TITLE			1	IAME			
NAME				TREET ADDRESS	Α.	l	
STREET ADDRESS	5			177 OT 710	· ·		

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 chapter 607, or on an attachment with an address, with all other like empowered.

SIGNATURE: