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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name F9500000189 (9)

TIDEWATER FINANCE COMPANY

Principal Place of Business

Mailing Address

## **FILED** Jan 20 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Or Qualified  01/12/1995  2. Principal Piece of Business   2a. Melling address   3. Pub. May   4. Fet Number   3. Mol Applied E   3. Mol Mol Applied E   3. Mol Applied E   3. Mol Mol Applied E   3. Mol Applie	565 CEDAR F		565 CEDAR RD.					
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Suite, Apt. #, etc.	2. Principal P	Tage of Business	2a. Mailing Address					
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Trust Fund Contribution   Added to Piese   Added to Pie		e			1	6. Ejection Campaign Financing \$5.00 May Re		
Country   Section   Sect				20 . VH				
25   23   25   25   25   25   25   25		Country	ZiR 2 2 2	Countr	y	8. This corporation owes or has paid the current year intangible		
9. Name and Address of Current Registered Agent  CT CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324  83  84 City  FL 85 Zip Code  T1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and mainfail with, and accept the originators of sociolom 607.4505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist of the provisions of agent, and accept the originations as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent.  SIGNATURE  10. CHECKLORE AND DIRECTORS 11.11 TITLE  11. TITLE  12. CHECKLORE AND DIRECTORS 11.12 TITLE  13. STREET ADDRESS  14. CITY-ST-2P  15. TITLE  14. Change Address (P.O. Box Number is NOT Acceptable)  15. TITLE  16. Change Address (P.O. Box Number is NOT Acceptable)  16. Change Address (P.O. Box Number is NOT Acceptable)  17. ST-2P  18. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11.12  18. ADDITIONS/CHANGES 10 OFFICERS AND DIRECTORS 11.12  19. Change Address (P.O. Box Number is NOT Acceptable of Acceptable	24	25	29 23328 F	30				
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, Florida Statutes, Tributes agent and the 1 applicable. (NOTE Propitizered Agent algorithms register agent and the 1 applicable.)  SIGNATURE  SIGNATURE  DELETE  11. TITLE  DOFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 and 12 an		9. Name and Address of Curren						
1200 S. PINE ISLAND RD. PLANTATION FL 33324  84 City  FL 85 Zip Code  71. Pursuant to the provisions of Sections 807,0502 and 907,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its regist office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607,5050, Florida Statutes, The above-named corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607,5050, Florida Statutes, The above-named corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607,5050, Florida Statutes, The above-named corporation's board of directors. I hereby accept the appointment as register agent. I am familiar with, and accept the obligations of, Section 607,5050, Florida Statutes, The above-named corporation submits this statement for the purpose of changing its regist of the purpose of changing its regist agent. I am familiar with a manufacture of the purpose of changing its regist of the purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent. I am familiar with a purpose of changing its regist agent and submit a purpose of changing its regist agent and submit a purpose of changing its regist agent and submit a purpose of changing its regist agent and submit a purpose of changing its re	CT	CORPORATION SYSTEM		81	Nan	lame		
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Signature, typed or printed agree agreet and tile if appbraame. (NOTE: Registered Agons signature required when reinstaltigh)	agent. I a	m familiar with, and accept the obliga	itions of, Section 607.0505, Flori	ida Statute	s.			
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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 eath; that I am a	indicated	eruiy inai ine information supplied wil on this annual report or supplemental	in this hiting does not quality for i Lannual report is true and accur	me exemp	at my s	stated in Section (19.07(3)(i), morida statutes, i further certify that the information by signature shall have the same legal effect as if made under oath; that I am an		

<del>TUR</del>E REQUIRED SIGNATURE: