

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Brenda B. Markham
Secretary of State
DIVISION OF CORPORATIONS

96 AUG 12 AM 8:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P 95-000072388
CREDIT AUTO ACCEPTANCE CORP

2025 RELEASE UNDER E.O. 14176

Principal Place of Business Mailing Address
2246 S.W. 24TH TERR
MIAMI, FL 33245-3628
3332

DO NOT WRITE IN THIS SPACE

1. Date Incorporated or Qualified	2a. Date of Last Report
SEP 19, 1995	
4. FEI Number	<input checked="" type="checkbox"/> Applied For New Approvals
5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fee
8. This corporation has liability for Intangible Tax Under R. 193.082, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Principal Place of Business	2b. Mailing Address
3. Name, Apt. #, etc.	3a. State, Apt. #, etc.
4. City & State	4a. City & State
5. Zip	5a. Zip
6. Country	6a. Country

9. Name and Address of Current Registered Agent
JOANNA PARKER
2246 S.W. 24TH TERR.
MIAMI, FL - 33145-3628

10. Name and Address of New Registered Agent
11. Name
12. Street Address (P.O. Box Number is Not Acceptable)
13. City
14. State
15. Zip Code

16. Pursuant to the provisions of Sections 607.0202 and 607.0204, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, as shown in the State of Florida. Such change was approved by the corporation's board of directors. I hereby accept the appointment as registered agent. I am a resident of the State of Florida and accept the provisions of Section 607.0202, Florida Statutes.

SIGNATURE: Joanna Parker Sec Treas JUL 30, 1996

OFFICERS AND DIRECTORS		ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995	
11 NAME	11 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
12 NAME	12 TITLE		
13 STREET ADDRESS	13 CITY-ST-SP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
14 CITY-ST-SP	14 CITY-ST-SP		
15 NAME	15 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
16 NAME	16 TITLE		
17 STREET ADDRESS	17 STREET ADDRESS	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
18 CITY-ST-SP	18 CITY-ST-SP		
19 NAME	19 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
20 NAME	20 TITLE		
21 STREET ADDRESS	21 STREET ADDRESS	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
22 CITY-ST-SP	22 CITY-ST-SP		
23 NAME	23 TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
24 NAME	24 TITLE		
25 STREET ADDRESS	25 STREET ADDRESS	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
26 CITY-ST-SP	26 CITY-ST-SP		

8/7/96
late fee waived, original was lost.

17. I do hereby certify that the information supplied with this filing is truthfully furnished and correct and reliable for the information stated in Section 199.07(2)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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 agent, or a duly authorized individual to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if brought, or on an attachment with an address.

SIGNATURE: J.W. [Signature] JUL 30, 1996

Best Copy Available, Original was lost. 8/7