

**FILED**  
**Jul 25, 2001 8:00 am**  
**Secretary of State**

07-10-2001 90003 020 \*\*\*550.00

**2001 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **F960000 663DD**

1. Entity Name

Warranty Acceptance Corporation

Principal Place of Business

Mailing Address

4400 Government Blvd.  
Mobile, AL 36693

4400 Government Blvd.  
Mobile, AL 36693

2. Principal Place of Business

3. Mailing Address

4400 Government Blvd.

4400 Government Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Mobile, AL

City & State

Mobile, AL

4. FEI Number

63-1180065

Applied For

Not Applicable

Zip

36693

Country

Mobile

Zip

36693

Country

Mobile

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Miller, Travis L  
106 East College Avenue  
Suite 1200  
Tallahassee FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-issuing)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW WITH FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: President  Delete  
NAME: Larry T. Myers  
STREET ADDRESS: 4400 Government Blvd.  
CITY-ST-ZIP: Mobile, AL 36693

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE: Vice President  Delete  
NAME: Claude Thompson  
STREET ADDRESS: 4400 Government Blvd.  
CITY-ST-ZIP: Mobile, AL 36693

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE: Director  Delete  
NAME: Larry T. Myers  
STREET ADDRESS: 4400 Government Blvd.  
CITY-ST-ZIP: Mobile, AL 36693

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE:  Delete  
NAME:  Delete  
STREET ADDRESS:  Delete  
CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE:  Delete  
NAME:  Delete  
STREET ADDRESS:  Delete  
CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

TITLE:  Delete  
NAME:  Delete  
STREET ADDRESS:  Delete  
CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
NAME:  Change  Addition  
STREET ADDRESS:  Change  Addition  
CITY-ST-ZIP:  Change  Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Claude Thompson

*Claude Thompson*

06/27/01

(251) 660-1901

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CRCE034 (1/00)