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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1998 DOCUMENT #

N44587

(6)

## FILED Feb 06 1998 8:00am Secretary of State

1. Corporation	n Name	. (0)							
NORTH AMERICAN CONSUMER CREDIT SERVICE CORPORATI ON									
Principal Place of Business Mailing Address						-: F 10 DETINI KII USUEE OLONI ULIDE ERLEE ENDI BINI -:	t Babat Babil At	SUL BIETT BIELL IBBE	
1761 WEST HILLSBORO BLVD. #402 1761 WEST HILLSBORO BLV DEERFIELD BCH. FL 33442 DEERFIELD BCH. FL 33442				/D. #402		3. Date Incorporated or Qualified 08/07/1991	<u></u>		
						4. FEI Number		Applied For	
						65-0275992		Not Applicab	le
2. Principal Place of Business		2a. Mailing Address				5. Certificate of Status Desired		75 Additional e Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing		00 May Be	-
22		27				Trust Fund Contribution			
City & Stat	e	City & State	City & State			7. Is this nonprofit corporation a homeow	ners assoc	ation?	7
23		28				Yes No			
Zip	Country	Zip	<del></del>			8. This corporation owes or has paid the			- 1
24	9, Name and Address of Curren	t Registered Agent	30	7		Personal Property Tax due June 30.  10. Name and Address of New Registere	Yes Agent	<b>X</b> No	$\dashv$
	31 (talle 2/12 / 144 / 155 0 1 0 0 / 15 / 15 / 15 / 15 / 15	t noglotorou rigoti-		81	Name	To reme and reactors of from regions.	oo ragoin	<del></del>	$\dashv$
NIX GE	ADGE DEIN				<del></del>			<u> </u>	
NIX, GEORGE REID 1761 WEST HILLSBORO BLVD. #402				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			- }
DEERFIELD FL 33442				83					一
					011				_
				84	City	F	L 85	Zip Code	
	to the provisions of Sections 617.0502 egistered agent, or both, in the State m familiar with, and accept the obligations.	2 and 617, 1508, Florida Stat of Florida, Such change was titions of, Section 617,0503, I	utes, the al authorize lorida Stat	bove d by tutes.	-named corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the a	e of changir appointmen	ng its registered t as registered	ਗ
SIGNATURE.	Signature, typed or printed name of registered ager	nt and title if applicable. (NK	TE: Registerer	d Agen	nt signature require	d when reinstating) DATE	<del></del>		ے  ''
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIREC	TORS IN 12	
TITLE	D	DELETE 1.1		TLE			Chan	ige 🔲 Additio	ıı   ₹
NAME	NIX, GEORGE R.		1.2 N	AME					3
STREET ADDRESS	1761 W. HILLSBORO BLVD		1.3 ST	ireet a	ADDRESS				[[
CITY-ST-ZIP	DEERFIELD FL	- Clasiere		TY-ST	- ZIP				
TITLE	D	DELETE	2.1 TI		1		Chan	ge 🗌 Additio	۰ / ۲
NAME	EHRLICH, ANITA LEE		2,2 NA						İ
STREET ADDRESS	1761 W. HILLSBORO BLVD				ADDRESS				-
CITY-ST-ZIP	DEERFIELD FL D	DELETE	2. 4 C	ITY-ST	1-ZIP		Chan	ge Additio	
NAME	NIX. MELBA		3.2 NA		1			30	"
STREET ADDRESS	1761 W. HILLSBORO BLVD		1		NDDRESS				1
CITY-ST-ZIP	DEERFIELD FL			TY-ST					-
TITLE		☐ DELETE	4.1 Til				Chan	ge 🔲 Additio	n
NAME			4, 2 N	AME					
STREET ADDRESS			4.3 ST	REET A	LODRESS				1
CITY-ST-ZIP			4,4 CH	TY-\$T-	-ZiP				Ī
TITLE		DELETE	5.1 TIT				Chan	ge Addition	ı
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REET A	DORESS				
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5.4 CIT	TY-ST-	- ZIP				
l marie		DCI ETE	■ C 4 707	C) C			Chan	no Addition	~ I

I hereby certify that the information supplied with this filling 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an laddress.

SIGNATURE: GEORGE & WIN ATUXLUE FOU

NAME STREET ADDRESS

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954 570 7001