

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000002269

Entity Name: SOUTH BAY ACCEPTANCE CORPORATION**Current Principal Place of Business:**10151 DERRWOOD BLVD BLDG 330
JACKSONVILLE, FL 32256**Current Mailing Address:**10151 DERRWOOD BLVD BLDG 330
JACKSONVILLE, FL 32256**FEI Number:** 33-5087327**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NATIONAL CORPORATE RESEARCH. LTD., INC.
155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	CEO, DIRECTOR
Name	MASCHERIN, WALTER P
Address	10151 DERRWOOD BLVD BLDG 330
City-State-Zip:	JACKSONVILLE FL 32256

Title	SEC
Name	ROMAINE, CHRISTOPHER D
Address	10151 DERRWOOD BLVD BLDG 330
City-State-Zip:	JACKSONVILLE FL 32256

Title	TRES, DIRECTOR
Name	FREEMAN, GEORGE
Address	10151 DERRWOOD BLVD BLDG 330
City-State-Zip:	JACKSONVILLE FL 32256

Title	PRESIDENT, DIRECTOR
Name	KINNETT, CHRISTOPHER
Address	10151 DERRWOOD BLVD BLDG 330
City-State-Zip:	JACKSONVILLE FL 32256

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTOPHER D. ROMAINE**SECRETARY****01/30/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date