## 2019 FOREIGN PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F14000003490

Entity Name: ACCEPTANCE LOAN COMPANY, INC.

#### **Current Principal Place of Business:**

3976-B GOVERNMENT BLVD. MOBILE, AL 36693-4723

#### **Current Mailing Address:**

POST OFFICE BOX 9189 MOBILE, AL 36691-0189 US

## FEI Number: 63-1131381

#### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

SIGNATURE	:: KIMBERLY LAUGHREY, ASSISTANT S	SECRETARY		08/30/2019
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	Р	Title	V	
Name	MITCHELL, CHRIS	Name	PARKER, MATTHEW	
Address	3976-B GOVERNMENT BLVD.	Address	3976-B GOVERNMENT BLVD.	
City-State-Zip:	MOBILE AL 36693-4723	City-State-Zip:	MOBILE AL 36693-4723	
Title	M, DIRECTOR	Title	CHAIRMAN OF THE BOARD	
Name	SPIVERY, SHANAVIA	Name	WILSON, BRUCE	
Address	3976-B GOVERNMENT BLVD.	Address	131 WEST FRONT STREET	
City-State-Zip:	MOBILE AL 36693-4723	City-State-Zip:	THOMASVILLE AL 36784	
Title	DIRECTOR	Title	DIRECTOR	
Name	WHITTED, HOWARD	Name	HOUSE, JAMES	
Address	131 WEST FRONT STREET	Address	131 WEST FRONT STREET	
City-State-Zip:	THOMASVILLE AL 36784	City-State-Zip:	THOMASVILLE AL 36784	
Title	DIRECTOR	Title	DIRECTOR	
Name	MABOWITZ, ERIC	Name	ELLEY, TOM	
Address	131 WEST FRONT STREET	Address	131 WEST FRONT STREET	
City-State-Zip:	THOMASVILLE AL 36784	City-State-Zip:	THOMASVILLE AL 36784	

#### Continues on page 2

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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: MATTHEW PARKER

Electronic Signature of Signing Officer/Director Detail

# FILED Aug 30, 2019 Secretary of State 1151693911CR

Certificate of Status Desired: No

## **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	DIRECTOR
Name	BEARDEN, ANDREW C. JR.	Name	BRIGGS, STEVE
Address	131 WEST FRONT STREET	Address	131 WEST FRONT STREET
City-State-Zip:	THOMASVILLE AL 36784	City-State-Zip:	THOMASVILLE AL 36784
Title	DIRECTOR	Title	DIRECTOR
Name	CASHIO, ANTHONY	Name	HARRISON, WILLIAM G.
Address	131 WEST FRONT STREET	Address	131 WEST FRONT STREET
City-State-Zip:	THOMASVILLE AL 36784	City-State-Zip:	THOMASVILLE AL 36784
Title	DIRECTOR	Title	DIRECTOR
Name	MITCHELL, WILLIAM C.	Name	PARKER, MATTHEW
Address	3976-B GOVERNMENT BLVD.	Address	3976-B GOVERNMENT BLVD.
City-State-Zip:	MOBILE AL 36693-4723	City-State-Zip:	MOBILE AL 36693-4723