

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 09, 1999 8:00 am  
Secretary of State

03-09-1999 90124 028 \*\*\*150.00

DOCUMENT # 147115

1. Corporation Name  
REGIONAL FINANCE COMPANY

Principal Place of Business  
300 W REYNOLDS  
P.O. BOX 163  
PLANT CITY FL 33564

Mailing Address  
300 W REYNOLDS  
P.O. BOX 163  
PLANT CITY FL 33564



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
05/23/1946

4. FEI Number  
59-0757153

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business  
21 110 E. Reynolds Street

2a. Mailing Address  
26 POST OFFICE BOX 163

Suite, Apt. #, etc.  
22 Suite 700

Suite, Apt. #, etc.  
27

City & State  
23 Plant City, Florida

City & State  
28 PLANT CITY, FLORIDA

Zip  
24 33566

Country  
25

Zip  
29 ###c\$

Country  
30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SHUMP, JAMES R.  
300 W REYNOLDS ST.  
P O BOX 163  
PLANT CITY FL 34289

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
110 E. Reynolds Street, Suite 700

83

84 City  
Plant City FL 85 Zip Code  
33566

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
VERNER, S. P.  
420 GULF BLVD.  
INDIAN ROCKS BCH. FL

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
Secretary/Director  
420 Gulf Blvd.  
Belleair Beach, Florida

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
SHUMP, JAMES R.  
300 W REYNOLDS  
PLANT CITY FL

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
Vice Pres./Director  
110 E. Reynolds Street, Suite 700  
Plant City, FL 33566

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
VERNER, JOHN V  
420 GULF BLVD  
TREASURER ISLAND FL

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP  
President/Director  
420 Gulf Blvd.  
Belleair Beach, Florida

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP  
Vice Pres/Director  
Edward M. Verner  
110 E. Reynolds Street, Suite 700  
Plant City, Florida 33566

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED  
James R. Shump, Vice President

2/18/99

Daytime Phone #

0081743

CR2E034 (11/98)