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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 09 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # 822900

(7)

ASSOCIATES CAPITAL SERVICES CORPORATION					#1411 B1844 \$4844 \$4814 B1841 B4841 B48
Principal Pla	ce of Business	Mailing Address		T SARSO JOING (1838 GLAIS 1911) BOIN AGS	Atali ment mikil finte gebit bift entit
% ASSOCIATES CORPORATION OF NORTH AMERICA P O BOX 660237					
250 CARPENTER FREEWAY ORP TAX DEPT IRVING TX 75062 DALLAS TX 75266-0237				DO NOT WRITE IN THIS SPACE	
US US				3. Date Incorporated or Qualified	IN THIS STACE
				06/06/1969	
2. Principal	Place of Business	2a. Mailing Address	<u> </u>	4. FEI Number	Applied For
21		26		35-1071117	Not Applicable
		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	\$8.75 Additional
		27			Fee Required
City & Sta	16	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	8. This corporation owes or has paid Personal Property Tax due June :	
		Current Registered Agent	1001	10. Name and Address of New Reg	
11	E PRENTICE-HALL CORPO	DRATION SYSTEM INC.	81 Name		
1201 HAYS STREET			62 Street Add	Iress (P.O. Box Number is Not Acceptable	
SUITE 105			OL Otrock Add	1000 (1.0. DOX 11011DB) 15 1101 ACCOPTABLE	
TALLAHASSEE FL 32301			83		
			84 City		85 Zip Code
11. Pursuan office or	t to the provisions of Sections ( registered agent, or both, in th	607.0502 and 607.1508, Florida Statu se State of Florida. Such change was	utes, the above-named corpora	poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing its registered I
agent. I	am familiar with, and accept th	e obligations of, Section 607.0505, F	lorida Statutes.	,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
SIGNATURE					
12.	Signature, typed or printed name of rugi OFFICE	RS AND DIRECTORS	TE Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICE	DATE FRS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	LONGNECKER, CHEST		1.2 NAME		
STREET ADDRESS		WAY	1,3 STREET ADDRESS		
CITY-ST-ZIP	IRVING TX		1.4 CITY-ST-ZIP		
TITLE	AVS	☐ DELETE	2.1 TITLE		Change Addition
NAME	GREENE, P.J.	ne/41/	2.2 NAME		
STREET ADDRESS		WAY	23 STREET ADDRESS		18 m
CITY-ST-ZIP	IRVING TX	I Diverse	2.4 CITY+ST-ZIP		
TITLE	HAYES, TIMOTHY	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ACA ALBOCHTON FORE	-WAY	3.2 NAME		
STREET ADDRESS	IRVING TX		3.3 STREET ADDRESS		
CITY-ST-ZIP	PD	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	<u></u>	Change Addition
NAME	MARSHALL, H.D.	Based Waldell	4. 2 NAME		
STREET ADDRESS	454 6466ELEER FOE	WAY	4.3 STREET ADDRESS		
CITY-ST-ZIP	IRVING TX		4.4 CITY-ST-ZIP		
TITLE	EVPD	DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	MANDICK, DENNIS J		5.2 NAME		
STREET ADDRESS	250 CARPENTER FREE	WAY	5.3 STREET ADDRESS		
CITY - ST - ZIP	IRVING TX		5.4 CITY-ST-ZIP		
TITLE	TV	DELETE	6.1 TITLE		Change Addition
NAME	HUGHES, J.F.	******	6.2 NAME		
STREET ADDRESS		WAY	6.3 STREET ADDRESS		
CITY-ST-ZIP	IRVING TX	T 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1 m 1	6.4 CITY-ST-ZIP		
14. I hereby indicated	certify that the information sup don this annual report or supp	plied with this ton items in the qualify formental annual fertial is now and ac	THE PARTY OF STATED IN	Section 119.07(3)(i), Florida Statutes. I fi ure shall have the same legal effect as if r juired by Chapter 607, Florida Statutes; a	urther certify that the information   made under eath; that I am an
officer or	director of the corporation or	tric receiver or 1885 Tem 10 EndR	RESIDEN eport as rec	uired by Chapter 607, Florida Statutes; a	nd that my name appears in