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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name 825158

(9)

CAPITAL CREDIT CORPORATION

FILED May 29 1998 8:00am Secretary of State



Principal Plac	n of Rusinass	Mailing Address			
Principal Place of Business Mailing Address 8000 ARLINGTON ESPRESSWAY 8000 ARLINGTON EXPRES			ECCWAY		
SUITE 210 SUITE 210					
JACKSONVILLE FL 32211-7478 JACKSONVILLE FL 32211 US US			1-7478		DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified
					3, Date incorporated or Qualified
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21 26				52-0849896 Not Applicable	
Suite, Apt. #, etc Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
22		27			5. Certificate of Statos Desired Fee Required
City & State	r	City & State			6. Election Campaign Financing \$5.00 May Be
Zip	Country	28	Counti		Trust Fund Contribution
24	25]	29	30	y	B. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	a Name and Address of Curre	1	130		10. Name and Address of New Registered Agent
UNITED STATES CORPORATION COMPANY				Name	
1201 HAYES ST.			8:	Street A	Address (P.O. Box Number is Not Acceptable)
STE. 105			Ľ	0,,000,7	College (1. C. Dox 11. 10. 10. 10. 10. 10. 10. 10. 10. 10.
TAI	LAHASSEE FL 32301		83	9[
			84	City	85 Zip Code
				L	
office or r	e gister ed agent, or both, in the State	e of Horida. Such chan ce wa s	authorized b	v the cara	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
agent. La	m familiar with, and accept the oblig	jations of, Section 607. 0505, F	Iorida Statute	08.	
SIGNATURE	Signature Typest or poets 0 name of registered as	ent and the diametrable	IF Registered Ad	nent signature /	required when reinstating) DATE
12.		ID DIRECTORS	13.	,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DV	DELETE	1.1 THLE		Change Addition
NAME			1.2 NAME	12 NAME Vice President (only)	
STREET ADDRESS	800 ARLINGTON EXPRESSY	AY, SUITE 210	1.3 STREE	1 ADDRESS	Not holding Director position
CITY-ST-ZIP	JACKSONVILLE FL	Detrete	1.4 CITY-	S1-ZIP	
TITLE	OCEO HEWITT, WILLIAM B	☐ DELETE	2.1 111(8	1	Change Addition
NAME STREET ADDRESS	8000 ARLINGTON EXPRESS	WAY SHITE 210	2.2 NAME	T ADDRESS	Director (only)
CITY+ST-ZIP	JACKSONVILLE FL	inni, gone ele	2 4 City		Not holding CEO position
TITLE	SD	DELETE	3.1 TITLE	01.24	Change Addition
NAME	LONGA, MICHAEL W		3.2 NAME	Į	•••
STREET ADDRESS	8000 ARLINGTON EXPRESS	WAY, SUITE 210	3.3 STREE	1 ADDRESS	Secretary & Treasurer
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CITY	SI-7IP	Not holding Director position
TITLE		DELETE	4.1 THLE	1	CEO Change Addition Director: Timothy G. Beffa
NAME			4. 2 NAMI	\ \	Director: Timothy G. Beffa
STREET ADDRESS				T ADDRESS	390 SouthWoods Mill Road, Su. 150
CITY-ST-ZIP TITLE		DELETE	4.4 City- 5.1 Title		St. Louis, MO 63017
NAME		(5.7 THEE		Director & Asst Treasurer
STREET ADDRESS				1 ADDRESS	Daniel J. Dolan
CITY-ST-ZIP			5.4 CITY-		390 SouthWoods Mill Road, Su. 150
TITLE		☐ DEL e te	6.1 TITLE		St. Louis, Mo 63017 Change Addition
NAME			6.2 NAME]	900002542119 (//)
STREET ADDRESS			6.3 STREE	1 ADDRESS	-06/01/9801051005 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
CITY-ST-ZIP			6.4 CHY-	ST-7IP	***158.75

14. Thereby 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 suppliemental 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 trusted 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.

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