

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

FILED

Feb 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # 835201 (5)

1. Corporation Name
COMPUTER CREDIT, INCORPORATED

Principal Place of Business P. O. BOX 5238 640 W. 4TH ST. WINSTON-SALEM NC 27113-2238	Mailing Address P. O. BOX 5238 640 W. 4TH ST. WINSTON-SALEM NC 27113-2238
--	--



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 10/13/1975	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 56-1021667	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent BARBER, GARY S. BROWARD FINANCIAL CENTER, 17TH FLOOR 500 E. BROWARD BLVD. FT. LAUDERDALE FL 33394		10. Name and Address of New Registered Agent	
		81	Name
		82	Street Address (P.O. Box Number is Not Acceptable)
		83	
		84	City
		85	Zip Code

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	PTD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAKE, J. GILMOUR	1.2 NAME	
STREET ADDRESS	819 DEVON CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	WINSTON-SALEM NC	1.4 CITY-ST-ZIP	27104
TITLE	VPTS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MANUEL, RICKIE L	2.2 NAME	
STREET ADDRESS	176 WAYSIDE DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINSTON-SALEM NC 27107	2.4 CITY-ST-ZIP	
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NIFONG, KAYE S	3.2 NAME	
STREET ADDRESS	2450 MERRIMONT DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINSTON-SALEM NC 27106	3.4 CITY-ST-ZIP	
TITLE	VP	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	O'CONNOR, MICHAEL J	4.2 NAME	
STREET ADDRESS	1044 CROSS GATE RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	WINSTON-SALEM NC	4.4 CITY-ST-ZIP	27106
TITLE	DP	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PICKETT, LONDON L	5.2 NAME	
STREET ADDRESS	1341 SEMINOLE DR.	5.3 STREET ADDRESS	5176 Huntcliff Trail
CITY-ST-ZIP	GREENSBORO NC 27408	5.4 CITY-ST-ZIP	Winston-Salem, NC 27104
TITLE		6.1 TITLE	Director <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	Paul Fulton
STREET ADDRESS		6.3 STREET ADDRESS	1093 E. Kent Rd.
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Winston-Salem, NC 27104

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 an appointment with an address.

SIGNATURE:

1/14/98 (336) 761-1524

CR2E034 (10/97)

OFFICERS:

President/Treasurer: J. Gilmour Lake *
243-02-5069
819 Devon Court
Winston-Salem, NC 27104

Vice President, Technical Services: Rickie L. Manuel *
239-72-5760
176 Wayside Drive
Winston-Salem, NC 27107

Secretary: Kaye S. Nifong
244-80-1972
2450 Merrimont Drive
Winston-Salem, NC 27106

Vice President, Sales: Michael J. O'Connor
326-40-8024
1044 Cross Gate Road
Winston-Salem, NC 27106

Vice President, Client Services:	Elisabeth S. Barksdale 243-33-7717 504 Wiley Avenue Winston-Salem, NC 27104	This is an additional officer effective 1/20/98.
---	--	--

*** Indicates Shareholder**

DIRECTORS:

J. Gilmour Lake
819 Devon Court
Winston-Salem, NC 27104

London L. Pickett
1341 Seminole Dr.
Greensboro, NC 27408

Paul Fulton
1093 East Kent Road
Winston-Salem, NC 27104