

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
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90139 014 ***150.00

DOCUMENT # F93000001377

1. Corporation Name

EQCC RECEIVABLES CORPORATION

Principal Place of Business

**10401 DEERWOOD PARK BLVD
JACKSONVILLE FL 32256
US**

Mailing Address

**LEGAL DEPARTMENT
P.O. BOX 53077
JACKSONVILLE FL 32201**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/19/1993

4. FEI Number

59-3170055

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

Suite, Apt. #, etc.

City & State

Zip

Country

2a. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM
1200 SOUTH PLINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

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.

(NOT Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
P	ENGMANN, RODOLFO F	10401 DEERWOOD PARK BLVD	JACKSONVILLE FL 32256	<input checked="" type="checkbox"/>
VPT	FRANZ, MICHAEL E	10401 DEERWOOD PARK BLVD	JACKSONVILLE FL 32256	<input type="checkbox"/>
VSD	HARRIS, JOHN C	10401 DEERWOOD PARK BLVD	JACKSONVILLE FL	<input type="checkbox"/>
D	FERRUCCI, MARK A	10401 DEERWOOD PARK BLVD	JACKSONVILLE FL 32256	<input type="checkbox"/>
D	WITCHER, ROBERT C.	10401 DEERWOOD PARK BLVD	JACKSONVILLE FL	<input type="checkbox"/>
VP	EVANS, JOHN D JR	10401 DEERWOOD PARK BLVD	JACKSONVILLE FL 32256	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	Change	Addition
President	ROSS, WILLIAM M.	10401 DEERWOOD PARK BLVD.	JACKSONVILLE, FL 32256	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	Change	Addition
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	Change	Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	Change	Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	Change	Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	Change	Addition

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 indicates that 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES B. DODD, SECRETARY

04/28/99 (904) 457-5004

Date

Daytime Phone #

CR2E034 (11/98)

004830