

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

DOCUMENT # F93000003971

1. Corporation Name

~~GENERAL ACCEPTANCE CORPORATION~~

Consumer Acceptance Corporation

Principal Place of Business

1025 ACUFF ROAD
BLOOMINGTON IN 47404
US

Mailing Address

1025 ACUFF ROAD
BLOOMINGTON IN 47404
US

2. Principal Place of Business

21 11825 N. Pennsylvania

2a. Mailing Address

26 2345 S. Lynhurst Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 210

City & State

23 Carmel, IN

City & State

28 Indianapolis, IN

24 Zip 46032 Country U.S.A.

29 Zip 46241 Country U.S.A.

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.
1201 HAYES ST
SUITE 105
TALLAHASSEE FL 32301

3. Date Incorporated or Qualified

08/25/1993

4. FEI Number

35-1739977

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

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE

NAME ALGOOD, M.L.
STREET ADDRESS 3810 EAST ST
CITY-ST-ZIP BLOOMINGTON IN 47404

TITLE VP ☒ DELETE

NAME ALGOOD, R. E
STREET ADDRESS 2800 S. OLCOTT BLVD
CITY-ST-ZIP BLOOMINGTON IN 47401

TITLE CFO ☒ DELETE

NAME BOZARTH, MARTIN
STREET ADDRESS 3705 BARRINGTON DR #205
CITY-ST-ZIP BLOOMINGTON IN 47408

TITLE D ☐ DELETE

NAME DICK, ROLLIN M
STREET ADDRESS 9085 E. ST RD 334
CITY-ST-ZIP ZIONSVILLE IN 46077

TITLE S ☒ DELETE

NAME COREY, R. I
STREET ADDRESS 3216 BRADSHIRE CT
CITY-ST-ZIP BLOOMINGTON IN 47401

TITLE VP ☒ DELETE

NAME KUHN, JAMES
STREET ADDRESS 4325 EAGLEVIEW CT
CITY-ST-ZIP BLOOMINGTON IL 47403

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President ☒ Change ☐ Addition

1.2 NAME James J. Terrell
1.3 STREET ADDRESS 4575 River Trail Road
1.4 CITY-ST-ZIP Jacksonville, FL 32277

2.1 TITLE Vice President ☒ Change ☐ Addition

2.2 NAME Timothy W. Haseley
2.3 STREET ADDRESS 5 Catalina Circle
2.4 CITY-ST-ZIP Zionsville, IN 46077

3.1 TITLE CFO ☒ Change ☐ Addition

3.2 NAME Timothy W. Haseley
3.3 STREET ADDRESS 5 Catalina Circle
3.4 CITY-ST-ZIP Zionsville, IN 46077

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE Secretary ☒ Change ☐ Addition

5.2 NAME Timothy W. Kappes
5.3 STREET ADDRESS 4069 Brockton Manor, N.Dr.
5.4 CITY-ST-ZIP Greenwood, IN 46143

6.1 TITLE ☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
TIMOTHY W. Kappes, Secretary

4/27/99

800-670-8160 Date ext 2172 Daytime Phone #

FILED
May 04, 1999 8:00 am
Secretary of State

05-04-1999 90021 028 ***150.00



DO NOT WRITE IN THIS SPACE

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