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FILED

Feb 03 1997 8:00am
Secretary of StatePROFIT
CORPORATION*
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F94000005834 (6)

1. Corporation Name
THE MONEY STORE AUTO FINANCE INC.

Principal Place of Business

1625 WEST NORTH MARKET BLVD
SUITE 210
SACRAMENTO CA 95834
US

Mailing Address

1625 WEST NORTH MARKET BLVD
SUITE 210
SACRAMENTO CA 95834
US

2. Principal Place of Business

21 1625 W. North Market Blvd.

Suite, Apt #, etc.

22 210

City & State

23 Sacramento, CA

Zip

24 95834

Country

25 US

2a. Mailing Address

26 PO Box 161179

Suite, Apt #, etc.

27

City & State

28 Sacramento, CA

Zip

29 95816

Country

30 US

3. Date Incorporated or Qualified

11/10/1994 10/13/94

3a. Date of Last Report

05/01/1996

4. FEI Number

22-3331186

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 Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐

Yes

☐

No

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE FL 32301

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	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	JONES, J TOM	5737 EUREKA	GRANITE BAY CA	<input type="checkbox"/>
VD	ALAN TURTLETAUB	65 DORISON DRIVE	SHORT HILL NJ	<input type="checkbox"/>
VSD	DEAR, MORTON	22 FORDHAM ROAD	LIVINGSTON NJ	<input type="checkbox"/>
EV	MEDICI, ANTHONY R	8545 54TH AVENUE CIRCLE EAST	BRADENTON FL	<input checked="" type="checkbox"/>
EVD	TEMPLETON, WILLIAM S	6423 PALM DRIVE	CARMICHAEL CA	<input checked="" type="checkbox"/>
V	ELWIN, ERIC R	10 KINGSTON DRIVE	LIVINGSTON NJ 07039	<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	2.1 TITLE	2.2 NAME	2.3 STREET ADDRESS	2.4 CITY - ST - ZIP	3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP
President/Director	Jones, J. Tom	5737 Eureka	Granite Bay, CA	CEO/Director	Turteltaub, Marc	4434 Maple Lane	Carmichael, CA																

14. I do 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
J. Tom Jones, President

1-14-97

Date

(916) 928-3100

Daytime Phone #

0528296

CR2E034 (9/96)