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 # F9400005834 (6)

THE MONEY STORE AUTO FINANCE INC.

FILED								
Apr 29 1998 8:00am								
Secretary of State								

Principal Plac	e of Business	Mailing Address							
1825 WEST NORTH MARKET BLVD PO BOX 161179 SUITE 210 SUITE 210 SACRAMENTO CA 95834 SACRAMENTO CA 95816					С	DO NOT WRITE IN THIS SPACE			
US		US			3, Date Incorporated 11/10/1994	d or Qualified			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number				
21		26 PO Box 161	26 PO Box 161179			22-3331186			
Suite, Apt. #, etc.		Suite, Apt. #, etc.	–		5. Certificate of Stat	us Desired	,	\$8.75 Additional Fee Required	
City & State		City & State	L '		6. Election Campaig	n Financing	\$5.00 May Be		
23			mento, California		Trust Fund Contri	bution		d to Fees	
Zip Country		Zip	-) a-a-a			8. This corporation owes or has paid the current year Intangible			
24	25 29 95816 :		30			Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
				31 Name	· · · · · · · · · · · · · · · · · · ·	ass of New Hegi	RIGIEG AGENI		
	RPORATION SERVICE COMP	ANY		INGINO					
	DI HAYES STREET		1	32 Street	Address (P.O. Box Number is	s Not Acceptable)		
174	LLAHASSEE FL 32301		h	33	·				
			1	34 City	_		FL 85 Zip	p Code	
11. Pursuant	to the provisions of Sections 607.	0502 and 607 1508. Florida Sta	dules the abo	ove-named	corporation submits this state	ement for the pur		its registered	
office or r	egistered agent, or both, in the Stim familiar with, and accept the of	tate of Florida. Such change wa	as authorized	by the cor	poration's board of directors.	I hereby accept I	the appointment a	is registered	
	in realinal with, and accept the or	nigations of, section our boos,	, riorda Statu	165.					
SIGNATURE	Signature, typed or product name of registeries	rager Land the diapplicable (I	NOTE Registered.	Agent signature	required when reinstating)		DATE		
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHAN		RS AND DIRECTO	ORS IN 12	
TITLE	PD	XXX DELET E	1,1 T(T)	£	President / Dir		Change	e XX Addition	
NAME	JONES , J TOM		1.2 NAM	ME	William J. Brad	-			
STREET ADDRESS	57 37 EUREKA		1.3 STR	EET ADDRESS	2942 Weald Way,	#2411			
CITY-ST-ZIP	GRANITE BAY CA		1.4 CiTY	/-ST-ZIP	Sacramento, CA	95833			
TITLE	VD	☐ DFLET E	2.1 TITL	E			☐ Change	e Addition	
NAME	ALAN TURTLETAUB		2.2 NAN	1F	Į				
STREET ADDRESS	65 DORISON DRIVE		2.3 STR	EET ADDRESS					
CITY-ST-ZIP	SHORT HILL NJ			Y - ST - ZIP				T7 6 4 800	
TITLE	VSD	OELETE	3 1 1171				☐ Change	Addition	
NAME	DEAR, MORTON		3.2 NAM						
STREET ADDRESS	22 FORDHAM ROAD LIMNGSTON NJ			EET ADDRESS					
CITY-S1-ZIP	CD CD	DELETE		Y-ST-ZIP	<u> </u>		Change	Addition	
TITLE NAME	TURTLEAUB, MARC	D DETER	4 1 THL 4, 2 NA		1		- Outside	noulion	
STREET ADDRESS	4434 MAPFI IN			eet address					
CITY-ST-ZIP	CARMICHAEL CA			-ST-ZIP					
TITLE	V	DELETE	5.1 TITL		 		Change	Addition	
NAME	ELWIN, ERIC R		5.2 NAN						
STREET ADDRESS	10 KINGSTON DRIVE			EET ADDRESS					
CITY-ST-ZIP	LIMINGSTON NJ 07039			'-S1-ZIP					
TITLE	<u> </u>	☐ DELETE	6.1 TiTL				☐ Change	Addition	
NAME			6.2 NAM	E					
STREET ADDRESS			6.3 STR	ET ADDRESS					
CITY-ST-ZIP				- \$1 - 7 IP					
14. I hereby of indicated officer or	certify that the information supplies on this annual report or supplement director of the corporation or the r	d with this filing does not qualif ental annual report is true and proceiver or trustee empowered	y for the exer accurate and to execute th	nption state that my sig is report as	ed in Section 119.07(3)(i), Flor gnature shall have the same le s required by Chapter 607. Flor	rida Statutes. I fur gal effect as if m prida Statutes; an	rther certify that the nade under oath; the not hat my name a	ne information hat I am an oppears in	
Block 12	or Block 13 if changed, or on an a	nttachment with un address.							