

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000005834 (6)

1. Entity Name

The Money Store Auto Finance Inc.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90078 001 ***300.00

Principal Place of Business

Mailing Address

707 3rd Street
West Sacramento, CA 95605

7073rd Street
West Sacramento, CA 95605

2. Principal Place of Business

707 3rd Street

Suite, Apt. #, etc.

3. Mailing Address

707 3rd Street

Suite, Apt. #, etc.

City & State

West Sacramento, CA 95605

Zip

Country

City & State

West Sacramento, CA 95605

Zip

Country

4. FEI Number

22-3331186

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

Corporation Service Company
1201 Hays Street
Tallahassee, FL 32301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President/Director	<input type="checkbox"/> Delete
NAME	James E. Maynor	
STREET ADDRESS	707 3rd Street	
CITY-ST-ZIP	West Sacramento, CA 95605	
TITLE	Secretary	<input type="checkbox"/> Delete
NAME	Jerry M. Miller, Jr.	
STREET ADDRESS	301 South College Street	
CITY-ST-ZIP	Charlotte, NC 28288	
TITLE	Treasurer	<input type="checkbox"/> Delete
NAME	Arthur Q. Lyon	
STREET ADDRESS	707 3rd Street	
CITY-ST-ZIP	West Sacramento, CA 95605	
TITLE	Senior Vice President	<input type="checkbox"/> Delete
NAME	Bruce Hurwitz	
STREET ADDRESS	707 3rd Street	
CITY-ST-ZIP	West Sacramento, CA 95605	
TITLE	Director	<input type="checkbox"/> Delete
NAME	Christopher Oddleifson	
STREET ADDRESS	1000 Louis Rose Place	
CITY-ST-ZIP	Charlotte, NC 28288	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 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

Bruce Hurwitz 2/17/00 (916) 617-2610

Date

Daytime Phone #

CR2E034 (9/99)