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Apr 01 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000003765 (2)

1. Corporation Name

AMERICA'S LOAN SOURCE, INC.



Principal Place of Business

303 JESSE JEWELL PARKWAY
SUITE 600
GAINESVILLE GA 30501

Mailing Address

303 JESSE JEWELL PARKWAY
SUITE 600
GAINESVILLE GA 30501

PO Box 1448
Montgomery, AL
36102-1448

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 PO Box 1448

27 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

07/25/1996

3a. Date of Last Report

4. FEI Number

74-2780943

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

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

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

PELHAM, PEGGY
6677 NORTH DAVIS HIGHWAY
PENSACOLA FL 32504

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 C ☐ DELETE

NAME GOETHE, ROBERT A
STREET ADDRESS 605 SOUTH PERRY STREET
CITY-ST-ZIP MONTGOMERY AL 36104

TITLE DP ☐ DELETE

NAME BUECKER, DAVID R
STREET ADDRESS 303 JESSE JEWELL PARKWAY
CITY-ST-ZIP GAINESVILLE GA 30501

TITLE DV ☐ DELETE

NAME FLEEGAL, JANET W
STREET ADDRESS 605 SOUTH PERRY STREET
CITY-ST-ZIP MONTGOMERY AL 36104

TITLE S ☐ DELETE

NAME HOLMES, LISA R
STREET ADDRESS 605 SOUTH PERRY STREET
CITY-ST-ZIP MONTGOMERY AL 36104

TITLE T ☐ DELETE

NAME WILLIAMS, VICTORIA
STREET ADDRESS 605 SOUTH PERRY STREET
CITY-ST-ZIP MONTGOMERY AL 36104

TITLE D ☐ DELETE

NAME MILLER, PETER D
STREET ADDRESS 303 JESSE JEWELL PARKWAY
CITY-ST-ZIP GAINESVILLE GA 30501

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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:

W. Neil Turner 3-2677 334-832-8099
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)