FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED Mar 31 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # F96000005854 (2) DEBT LIQUIDATORS, INC. Principal Place of Business Mailing Address 8000 ARLINGTON EXPRESSWAY. SUITE 400 5425 ROBIN HOOD RD SUITE 101-B JACKSONVILLE FL 32211 DO NOT WRITE IN THIS SPACE NORFOLK VA 23513 3. Date Incorporated or Qualified 11/08/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 54-1814411 **5425 ROBIN** HOOD RD Not Applicable Sulte, Apt. #, etc. 101B Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing NORFOLK, 23 Trust Fund Contribution Added to Fees 28 Country Zip Country This corporation owes or has paid the current year Intangible 23513 US Yes No. 24 25 30 Personal Property Tax due June 30. 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 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) 10997 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE XX Change TITLE 1.1 TITLE D/V/AS TRAY, RONALD G NAME 1.2 NAME **CR2E034** 5425 ROBIN HOOD ROAD, SUITE 101-A STREET ADDRESS 1.3 STREET ADDRESS NORFOLK VA 23513 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE RALEY, ROBERT S JR 2.2 NAME NAME 5425 ROBIN HOOD ROAD, SUITE 101-A STREET ADDRESS 2.3 STREET ADDRESS NORFOLK VA 23513 CITY-ST-ZIP 2.4 CITY+ST-ZIP DELETE 3.1 TITLE Change Addition TITLE MCINTYRE, MARY E NAME 3.2 NAME 5425 ROBIN HOOD ROAD, SUITE 101-A 3.3 STREET ADDRESS STREET ADDRESS NORFOLK VA 23513 CITY-ST-ZIP 3.4. C(TY-ST-ZIP TITLE X Y DELETE 4.1 TITLE Change **K K**Addition CRĀIG D POPPEN KARSTEN, DAVID W 4 2 NAME NAME 5425 ROBIN HOOD RD. #101B 5425 ROBIN HOOD RD #101B STREET ADDRESS 4.3 STREET ADDRESS NORFOLK VA NORFOLK, VA 23513 CITY - ST - ZIP 4.4 CITY-ST-ZIP Change DELETE TITLE 51 TITLE ☐ Addition PARIS, JOHN M JR 5.2 NAME NAME ONE COMMERCIAL PLACE, SUITE 2000 STREET ADDRESS 5.3 STREET ADDRESS

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 eath, that I am an officer or director of the corporation or the receiver or fusite empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

Change

Addition

CRONALD G TRAN 3/10/00

DELETE

NORFOLK VA 23510

COOKE, FLETCHER A

NORFOLK VA

5425 ROBIN HOOD RD #101B

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME