## 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 # F9600006575 (2)

SMART CHOICE HOLDINGS, INC.

Principal Place of Business Mailing Address					T TOWARD PARTY WARE THE BOARD WARE CONTROL OF THE C	DI WIIII (0801 BRI) 1861
5200 S. WASHINTON AVE TITUSVILLE FL 32780 TITUSVILLE FL 32780 US			AVE		DO NOT WRITE IN THIS SPA	ACE
					3. Date Incorporated or Qualified	
- 6-1-1-10					12/16/1996	
2. Principal Place of Business 2a. Mailing A 21 26		2a, Mailing Address	Acoress		4. FEI Number	Applied For Not Applicable
		Suite, Apt. #, etc.	Suite, Apt. #, etc.		59-3395504	\$8.75 Additional
22		r	27		5. Certificate of Status Desired	Fee Required
City & State	City & State City & State				6. Election Campaign Financing	\$5.00 May Be
		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Countr		8. This corporation owes or has paid the curren	
24	25	29			Personal Property Tax due June 30.  Yes  No  10. Name and Address of New Registered Agent	
04 \						
HUTCHINSON, JAMES NEAL JR. 5200 8. WASHINGTON AVE						
TITUSVILLE FL 32780			8	2 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
""	SVILLE FL 32700		8	3		
				4 City	1	DE Zin Cado
				4 City	FL '	35 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 pointed harms of registered agent and later' applicable (NOTE Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AN		13.	geri signature re	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12
TITLE	PD	DELETE	11100			Change 🔀 Addition
NAME	SMITH, GARY R.		1.2 NAM	E	Siebel Donna	1
STREET ADDRESS	5200 S. WASHINGTON AVE		1.3 STRE	ET ADDRESS	Siebel, Donna 5200 S. Washington Ave	
CITY-ST-ZIP	TITUSVILLE FL		1.4 CITY	- S1 - ZIP	Titusville, FL 327BD	
TITLE	VS	☐ DELETE	2.1 TITLE	· [	,	Change
NAME	HUTCHINSON, JAMES NEAL	JR.	2 2 NAM	t		
STREET ADDRESS	5200 S. WASHINGTON AVE.		2.3 STRE	ET ADDRESS		
CITY-ST-ZIP	TITUSVILLE FL	Driere		- ST- ZIP		Channe T Name:
TITLE		☐ DELETE	3.1 1(TLE		L	Change
NAME			3.2 NAM			
STREET ADDRESS			1	ET ADDRESS		1
CITY-ST-ZIP TITLE		DELETE	3.4. C(TY 4.1 TITLE	- ST- ZIP		Change Addition
NAME		beccit	4.1 MILE		<del>-</del>	
STREET ADDRESS				ET ADDRESS		ļ
CITY-ST-ZIP			4.3 STRE			
TITLE		DELETE	51 TITLE			Change Addition
NAME			5.2 NAM	i		
STREET ADDRESS				ET ADDRESS		1
CITY-ST-ZIP			5.4 CITY			
TITLE		DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAM	.		
STREET ADDRESS				E1 ADDRESS		ļ
CITY-ST-ZIP			6.4 CITY			

14. Thereby 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 arrival report or supplier ental arrival 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 trustice 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 attrictiment with arreddress.

**FILED** 

May 18 1998 8:00am

Secretary of State