

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

APPROVED  
AND  
FILED

99 JUN -8 AM 10:19

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**02/06/1998**
4. FET Number  
**33-0711570**
5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax ☐ Yes ☒ No
10. Name and Address of New Registered Agent:

PROFIT CORPORATION  
ANNUAL REPORT  
1999

FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F98000000722**

1. Corporation Name  
**AUTO-BY-TEL ACCEPTANCE CORPORATION**

Principal Place of Business  
**18872 MACARTHUR BLVD. 2ND FL  
IRVINE CA 92612-1400**

Mailing Address  
**18872 MACARTHUR BLVD. 2ND FL  
IRVINE CA 92612-1400**

2. Principal Place of Business  
21 Suite, Apt. #, etc  
22 City & State  
23 Zip Country  
24

2a. Mailing Address  
26 Suite, Apt. #, etc  
27 City & State  
28 Zip Country  
29

9. Name and Address of Current Registered Agent

**NATIONAL REGISTERED AGENTS, INC.  
526 E. PARK AVENUE  
TALLAHASSEE FL 32301**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City

**000002902910--5  
-06/14/99--01007--009  
\*\*\*\*150.00 \*\*\*\*26.25**

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's signature is required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☒ DELETE  
NAME **DUKE, MICHAEL T**  
STREET ADDRESS **18872 MACARTHUR BLVD., 2ND FL**  
CITY-ST-ZIP **IRVINE CA**

TITLE **VD** ☒ DELETE  
NAME **LORIMER, MARK W**  
STREET ADDRESS **18872 MACARTHUR BLVD., 2ND FL**  
CITY-ST-ZIP **IRVINE CA**

TITLE **V** ☒ DELETE  
NAME **LOWELL, MICHAEL**  
STREET ADDRESS **18872 MACARTHUR BLVD., 2ND FL**  
CITY-ST-ZIP **IRVINE CA**

TITLE **S** ☐ DELETE  
NAME **FROST, CRAIG S**  
STREET ADDRESS **18872 MACARTHUR BLVD., 2ND FL**  
CITY-ST-ZIP **IRVINE CA**

TITLE **D** ☒ DELETE  
NAME **CRIMES, ROBERT G**  
STREET ADDRESS **152 WEST 57TH STREET**  
CITY-ST-ZIP **NEW YORK NY**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE **President** ☒ Change ☐ Addition  
12 NAME **Ann M. Delligatta**

13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE **VP; CFO; Asst. Sec.** ☒ Change ☐ Addition  
22 NAME **Hoshi Printer**

23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE **VP Product Development** ☐ Change ☒ Addition  
32 NAME **Jeff Compangano**

33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE **Director** ☐ Change ☐ Addition  
42 NAME **Craig S. Frost**

43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE **Director** ☒ Change ☐ Addition  
52 NAME **Mark W. Lorimer**

53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

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 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, with all other like empowered

SIGNATURE:

Craig S. Frost, Secretary June , 1999

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)