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2001 UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # F9800006321						FILED				
1. Entity Name ICC-South Capital Funding, Inc.					01 JUL 23 PM 4: 44					
1					1	SECRET	ADV AD	лета? Гета?	· E	
Principal Place of Business Mailing Address						TALLAH,	ASSEE,	FLOR	DA DA	
							;			
2. Principal Place of Business 3. Mailing Address							•			
32700 U.S. Hwy. 19 No. 32700 U.S. Hwy.			. 19	No.			1			
Suite, Apt. #, etc. Suite, Apt. #, etc.					}	DO NOT WRITE	IN THIS SE	'ACE		
City & Sta		City & State				El Number	1		oplied For	]
Zip Ha	Country	Palm Harbor, F	Coun	itry		59-3540277		8.75 Ad	ot Applicable	+
34684	Pinellas	34684		ellas	5. (	Certificate of Status Desired		ee Require		
	6. Name and Address of Current	Registered Agent		Nome	7. N	lame and Address of New Re	gistered Ag	ent		7
_	tion Service Company			Name						
	ys Street ssee, FL 32301-2525			Street Address (P.O. Box Number is Not Acceptable)						
				City				Zip Cod	e	1
	<del></del>	<del></del>				_ <del> </del>	FL		<u> </u>	-
8. The above	e named entity submits this statement fo	r the purpose of changing its r	egister	ed office or r	registered agr	ent, or both, in the Stale of Flori	i	nerviti		1
SIGNATURE						9000U4	T-J2	. •_•	<b>∵</b>	7
0.0.0.0.0.0	Signature, typed or printed name of registered agent a	and title il applicable. (NOTE:	Registere	d Agent signature	e required when re	nstating)	DATE			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)				will be \$55	50,00	10. Election Campaign Final Trust Fund Contribution.	ncing		0 May Be to Fees	
11.	OFFICERS AND		12.	A CONTRACTOR OF THE CONTRACTOR	AND DESCRIPTION OF THE PARTY OF	DITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S (N 11	1
TITLE	Vice President	☐ Delete	TITLE			resident		Change	Addition	3
NAME STREET ADDRESS	Robert A. Chambers 317 Fifth St.N.E., St	ο λ	NAM	E Et address		Chambers, Sr. deira Avenue				1
CITY-ST-ZIP	Atlanta, GA 30308	C. A		- ST- ZIP		Sables, FL 33134				100
TITLE	Secretary/Treas/Direc	tor Delete	TITLE		Secreta	ary/V.P./Director	(	Change	Addition	S
NAME	William Planes, II			1	William Planes, II					(
STREET ADDRESS CITY-ST-ZIP	32700 U.S. Hwy. 19 No Palm Harbor, FL 34684	•		ET ADDRESS -ST-ZIP		ollins Ave. #1505 Beach, FL 33140				l
TITLE	President/Director	☐ Delete	TITLE		Directo	or	(	Change	Addition	1
NAME	Steve Pallos					E. Pallos				
STREET ADDRESS CITY-ST-ZIP	32700 U.S. Hwy. 19 No Palm Harbor, FL 34684			ET ADDRESS -ST-ZIP		J.S. Hwy 98 No. #9 nd, FL 33809	9/2			
TITLE	CEO	☐ Delete	TITLE	<del></del>	Preside	ent/CEO/Director	. (	Change	☐ Addition	1
NAME	William Planes	<del>_</del>	NAM		William	Planes, Sr.				
STREET ADDRESS CITY-ST-ZIP	854 Cypress Lakeview Tarpon Springs, FL 34			ET ADDRESS - ST- ZIP		oress Lake View C Springs, FL 34689				1
TITLE	Turpon opinion, 12 or	☐ Delete	TITLE		<del></del>	Sect./Sr. V.P.		Change	<b>₩</b> Addition	1
NAME			NAME	,	Langfre	ed W. White			**	
STREET ADDRESS CITY-ST-ZIP			1	ET ADDRESS -ST-ZIP		shbury Drive ster, FL 33764				İ
TITLE		□ Delete	TITLE			cer/Controller		Change	<b>₩</b> Addition	1
NAME		_ Color	NAM		Deboral		-			
STREET ADDRESS				ET ADDRESS		aber Lane		_ 2		
CITY-ST-ZIP	and that the information a matter of the	this filing does not qualify for		-ST-ZIP		arbor, FL 34685	uther certif	inal the	nformation	1
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.										
CICNAT	upe. L. J. J.	Asst. Secre	etar	y/Sr. V	/ice Pre	s. July <b>&amp;</b> 2001	72	7-781-	-9885	
SIGNAT	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER OF				Date		Imu Phone #		ł

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## ATTACHMENT TO UBR OF ICC-SOUTH CAPITAL FUNDING, INC.

Vice President/Director Regina M. Planes 854 Cypress Lake View Court Tarpon Springs, FL 34689 Addition

Director James W. Keen 3530 NW 89<sup>th</sup> Way Hollywood, FL 33024 Addition

DIVISION OF CORPORATION



ACCOUNT NO. : 072100000032

REFERENCE: 233707 5061379

AUTHORIZATION

COST LIMIT : \$ 61.25

ORDER DATE : July 23, 2001

ORDER TIME : 3:37 PM

ORDER NO. : 233707-020

CUSTOMER NO: 5061379

CUSTOMER: Langfred White, Esq

Icc Financial Group

32700 Us Highway 19 North

Palm Harbor, FL 34684-3119

## ANNUAL REPORT FILING

NAME: ICC-SOUTH CAPITAL FUNDING, INC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea-EXT#1114

EXAMINER'S INITIALS: