

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 08, 2000 8:00 am
Secretary of State

02-08-2000 90053 009 ***150.00

DOCUMENT # F99000003169

1. Entity Name
OTTACO ACCEPTANCE, INC.

Principal Place of Business 241 E. SAGINAW EAST LANSING MI 48823	Mailing Address 241 E. SAGINAW EAST LANSING MI 48823-2792
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00014006



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address <i>P.O. Box 4010</i> Suite, Apt. #, etc. City & State <i>East Lansing MI</i> Zip <i>48826-4010</i>
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4. FEI Number **38-3360278** Applied For Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FOOTE, KENNETH J
129 S. KENTUCKY #502
LAKELAND FL 33801

7. Name and Address of New Registered Agent

Name *Jason Pratt*
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE *Jason Pratt* *Jason Pratt* *1-31-00*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE	NAME	TITLE	NAME
PD	LUTHER, MICHAEL F 241 E. SAGINAW EAST LANSING MI 48823	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
VPD	MOCHMAR, GEORGE F 241 E. SAGINAW EAST LANSING MI 48823	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
VPTD	WAHL, MARK D 241 E. SAGINAW EAST LANSING MI 48823	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
VPSD	CARLSON, CARL M 241 E. SAGINAW EAST LANSING MI 48823	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
VP	NYE, TERRI W 241 E. SAGINAW EAST LANSING MI 48823	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
VP	SHEPHERD, BARRY 241 E. SAGINAW EAST LANSING MI 48823	<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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.

SIGNATURE: *Jason Pratt*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/00 *517-536-7627*
Date Daytime Phone #