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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K51930

Country

9. Name and Address of Current Registered Agent

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GLASGOW, LOYD H. 1209 44 AVE EAST

BRADENTON FL 34203

(1)

ACA FINANCIAL CORP.

Mailing Address

1209 44TH AVE EAST BRADENTON FL 34203

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

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Zip

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Principal Place of Business

1209 44TH AVE EAST **BRADENTON FL 34203**

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

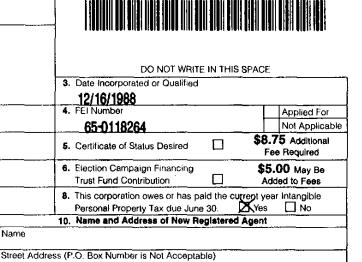
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FILED Apr 30 1998 8:00am Secretary of State



11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules.

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Country

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SIGNATURE	Signature typed or printed name of registered agent and to	tte if applicable (NOTI	Registered Agent signature requ	uired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		S IN 12
ime	ST	DELETE	1.1 TITLE		Change	Addition
	COOKE, TOM		1.2 NAME			
ADDRESS	1209 44TH AVE EAST		1.3 STREET ADDRESS			
ST-ZIP	BRADENTON FL		14 CITY-ST-ZIP			
	P	DELETE	21 TITLE		Change	Addition
	GLASGOW, LOYD H.		2.2 NAME			
STREET ADDRESS	1209 44TH AVE EAST		2.3 STREET ADDRESS			
CITY-S7-ZIP	BRADENTON FL		2. 4 CITY-ST-ZIP			
TITLE	V	☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME	VANSKYHAWK, GALE		3.2 NAME			
STREET ADDRESS	1209 44TH AVE EAST		3.3 STREET ADDRESS			
City-St-ZiP	BRADENTON FL		3.4. CITY - ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 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 of this annual report or supplemental armuel 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 comporation or the feeding or this true amount of the comporation or the feeding of the composition of the composition of the composition or the feeding of the composition of the composition

SIGNATURE:

R Gale Van Skyhawk, Vice-Pres

941- 256- 2727

Zip Code