

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L25935 (2)

1. Corporation Name

CREDITQUICK FINANCE COMPANY



Principal Place of Business

Mailing Address

RICHARD E. SWARTLEY
50 LAURA STREET
JACKSONVILLE FL 32202-3610

50 NO LAURA STR
ATTN: REGULATORY RELATIONS
JACKSONVILLE FL 32202
US

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SWARTLEY, RICHARD E
50 LAURA STREET
JACKSONVILLE FL 32202-3610

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

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 607.0506, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent, and date (if applicable)

(NOTE: If a third agent is named, the first agent's name must be included)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME JORDAN, RICHARD D.
STREET ADDRESS 50 LAURA STREET
CITY-ST-ZIP JACKSONVILLE FL

XX DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

TITLE D
NAME BREWER, RICHARD C JR
STREET ADDRESS 7145 WILD HORSE CIR
CITY-ST-ZIP SARASOTA FL

DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

TITLE D
NAME CHAPLIN, LEE H JR
STREET ADDRESS 9000 SOUTHSIDE BLVD.
CITY-ST-ZIP JACKSONVILLE FL

DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

TITLE DP
NAME HARNAGE, BURNIS E
STREET ADDRESS 50 LAURA STREET
CITY-ST-ZIP JACKSONVILLE FL

XX DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

TITLE D
NAME JOHNSON, THOMAS P JR
STREET ADDRESS 4964 PRINCE EDWARD ROAD
CITY-ST-ZIP JACKSONVILLE FL

XX DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

TITLE D
NAME MONDELLO, JAMES F
STREET ADDRESS 440 ALEXANDRIA CIRCLE
CITY-ST-ZIP FORT LAUDERDALE FL

DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

900001797709
-04/29/96--01026--006
***208.75

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/96 (904) 721-5299
Daytime Phone

CR2E034 (12/95)