

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
00 JAN 21 PM 4:10

DOCUMENT # L47131

1. Corporation Name
INDEPENDENCE ACCEPTANCE CORP.

Principal Place of Business
7805 N. Dixie Dr.
Dayton, OH 45414

Mailing Address
7805 N. Dixie Dr.
Dayton, OH 45414

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida
January 29, 1990

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number
31-1291065

Applied For
NOT Applicable

City & State

City & State

6. CERTIFICATE OF STATUS DESIRED.

Zip Country Zip Country

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DST	Robert L. Karshner	14499 N. Dale Mabry	Tampa, FL 33618
DV	Vince Julien	2079 N. Pointe Alexis Dr.	Tarpon Springs, FL
DP	Jack A. Karshner	6350 Troy-Frederick Rd.	Tipp City, OH
			200003105232--5 -01/20/00--01108--009 ****150.00 ****150.00
			200003105232--5 -01/20/00--01108--010 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

Gibbons, Tucker, Miller, Whatley & Stein, a
Professional Association
101 E. Kennedy Boulevard, Suite 1000
Tampa, FL 33602

9. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
Suite, Apt. #, Etc.
City State Zip Code
FL

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent *Jacqueline S. Whatley, Pres.*
REGISTERED AGENT MUST SIGN

Date 1/6/2000

11. This corporation owes the current year Intangible Personal Property Tax due June 30. Yes No

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Jack A. Karshner Pres. (JACK A. KARSHNER)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

12-15-99 937-484-5656
X 111

AD