2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L47131

Entity Name: INDEPENDENCE ACCEPTANCE CORP.

FILED Sep 11, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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14499 N DALE MABRY SUITE 149

TAMPA, FL 33618 **Current Mailing Address:**

New Mailing Address:

BRANDON, FL 33510

14499 N DALE MABRY SUITE 149

TAMPA, FL 33618 US

FEI Number: 31-1291065

2720 BROADWAY CENTER BLVD. BRANDON, FL 33510

2720 BROADWAY CENTER BLVD.

FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

GIBBONS, TUCKER, MILLER, WHATLEY & STEIN 101 E. KENNEDY BLVD., SUITE 1000

TAMPA, FL 33602

GIBBONS, TUCKER, MILLER, WHATLEY & STEIN 101 E. KENNEDY BLVD. SUITE 2190 TAMPA, FL 33602 US

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:

09/11/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

FEI Number Applied For ()

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete KARSHNER, ROBERT L., Name: Address:

14499 N DALE MABRY TAMPA, FL 33618 City-St-Zip:

() Delete DV Title: Name: JULIEN, VINCE, 18716 63RD AVE. EAST Address: BRADENTON, FL 34202 City-St-Zip:

Title: DP () Delete KARSHNER, JACK A., Name: 27730 PINE POINT DR Address: City-St-Zip: WESLEY CHAPEL, FL 33543

Title: DT () Delete DOTSON, JEFFREY, Name:

Address: 6001 CAPE LOOP City-St-Zip: LAND O LAKES, FL 34639 Title: (X) Change () Addition

JULIEN, VINCE, Name: 18716 63RD AVE. EAST Address: City-St-Zip: BRADENTON, FL 34202

Title: () Change () Addition Name:

Address: City-St-Zip:

Title: DP (X) Change () Addition

JULIEN, VINCE, Name: 18716 63RD AVE, EAST Address: City-St-Zip: BRADENTON, FL 34202

Title: () Change () Addition

Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOTSON, JEFFREY DT 09/11/2008