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Apr 15 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # L77611 (6)

1. Corporation Name
NAL ACCEPTANCE CORPORATION

Principal Place of Business	Mailing Address
500 CYPRESS CK RD SUITE 590 FT. LAUDERDALE FL 33309-6127 US	500 CYPRESS CR RD W SUITE 590 FT. LAUDERDALE FL 33309 US

3. Date Incorporated or Qualified: 06/01/1990
3a. Date of Last Report: 03/18/1996

2. Principal Place of Business 21 ___
2a. Mailing Address 26 ___
Suite, Apt #, etc 22 ___ | Suite, Apt. #, etc. 27 ___
City & State 23 ___ | City & State 28 ___
Zip 24 ___ Country 25 ___ | Zip 29 ___ Country 30 ___

4. FEI Number ~~50-3016806~~ [redacted] ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

EMO CORPORATE SERVICES, INC.
100 NORTHEAST THIRD AVENUE
SUITE 1100
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name: Mercedes Padin, Esq.
82 Street Address (P.O. Box Number is Not Acceptable): 500 Cypress Creek Road West, Suite 590
83
84 City: Ft. Lauderdale FL 85 Zip Code: 33309

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 607.0505, Florida Statutes.

SIGNATURE Mercedes Padin Mercedes Padin 3/10/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	CCEO & DIR	☐ DELETE
NAME	BARTOLINI, ROBERT R.	(X) Change
STREET ADDRESS	500 CYPRESS CREEK RD W, STE 590	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	~~PCSD~~ PRES/COO/ASST SECY/DIR	☐ DELETE
NAME	SCHAEFFER, JOHN T.	(X) Change
STREET ADDRESS	500 CYPRESS CREEK RD W, STE 590	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	VPAS	☐ DELETE
NAME	CARLSON, ROBERT J.	
STREET ADDRESS	500 CYPRESS CREEK RD W, STE 590	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	~~VPAS~~ SECY	☐ DELETE
NAME	WOODSIDE, JOANN	(X) Change
STREET ADDRESS	500 CYPRESS CREEK RD W, STE 590	
CITY-ST-ZIP	FT. LAUDERDALE FL	
TITLE	VP/TREAS	(X) Add ☐ DELETE
NAME	LAVIGNE, DENNIS R.	
STREET ADDRESS	500 Cypress Creek Rd W, Ste 590	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
TITLE	VP	(X) Add ☐ DELETE
NAME	WILDEN, PETER J.	
STREET ADDRESS	500 Cypress Crk Rd W, Ste 590	
CITY-ST-ZIP	Ft. Lauderdale, FL 33309	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VP	☐ Change ☒ Addition
1.2 NAME	GOWAR, PAUL	
1.3 STREET ADDRESS	500 Cypress Crk Rd W, Ste 590	
1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
2.1 TITLE	VP	☐ Change ☒ Addition
2.2 NAME	REPECKI, PAUL R.	
2.3 STREET ADDRESS	500 Cypress Crk Rd W, Ste 590	
2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
3.1 TITLE	VP	☐ Change ☒ Addition
3.2 NAME	DANIEL, DOUGLAS C.	
3.3 STREET ADDRESS	500 Cypress Crk Rd W, Ste 590	
3.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
4.1 TITLE	ASST SECY	☐ Change ☒ Addition
4.2 NAME	PEOPLES, ROBERT W.	
4.3 STREET ADDRESS	500 Cypress Crk Rd W, Ste 590	
4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33309	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS	(SEE ATTACHED EXHIBIT A FOR COMPLETE LIST)	
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP	$226.25 Dep. by Bank	

RW 4-15-97

CR2E034 (9/96)

14. I do 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 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: JoAnn Woodside JoAnn Woodside, Secy 3/10/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0520907

NAL ACCEPTANCE CORPORATION 98-282

Corporate Officers and Directors
Names, Home Addresses, and Social Security Numbers

Robert R. Bartolini 7707 NW 47 Drive Coral Springs, FL 33067	Chairman, Chief Executive Officer, and Director SS#: 185-36-6536
John T. Schaeffer 1633 SE 6 Street Deerfield Beach, FL 33441	President, Chief Operating Officer, Assistant Secretary and Director SS#: 192-34-6550
Robert J. Carlson 10325 SW 53 Street Cooper City, FL 33328	Vice President and and Assistant Secretary SS#: 262-08-5902
Dennis R. LaVigne 7057 NW 66 Terrace Parkland, FL 33067	Vice President and Treasurer SS#: 353-36-7804
Peter J. Wilden 6406 NW 55 Manor Coral Springs, FL 33067	Vice President - Collections & Operations SS#: 523-58-0553
Paul Gowar 1257 NW 123 Street Pembroke Pines, FL 33026	Vice President - Credit & Funding SS#: 590-16-3638
Paul R. Repecki 995 SW 56 Avenue Margate, FL 33068	Vice President - Corporate Services SS#: 110-30-6198
Douglas C. Daniel 7701 NW 61 Terrace Parkland, FL 33067	Vice President - Sales & Marketing SS#: 224-78-5637
JoAnn Woodside 2560 NW 99 Avenue Coral Springs, FL 33065	Secretary SS#: 310-38-5073
Robert W. Peoples 388 NW 107 Terrace Coral Springs, FL 33071	Assistant Secretary SS#: 169-34-7131