

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 15 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # L89473

(7)

1. Corporation Name

FIRST NATIONAL PAWN, INC.

Principal Place of Business

511-C GREENE STREET
KEY WEST FL 33040
US

Mailing Address

4 N. 29TH STREET
BILLINGS MT 59101
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/23/1990

4. FEI Number

65-0209547

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

BROWN, BARBARA D.
511-C GREENE STREET
KEY WEST FL 33040

10. Name and Address of New Registered Agent

81 Name

Brown, Benjamin L.

82

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

511-C Greene Street

83

84

City

Key West

FL

85

Zip Code

33040

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

Benjamin L. Brown

Benjamin L. Brown

03-23-98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPT ☒ DELETE
NAME BRON, BARBARA D.
STREET ADDRESS 511-C GREENE STREET
CITY-ST-ZIP KEY WEST FL

TITLE DVP ☒ DELETE
NAME BROWN, BENJAMIN L.
STREET ADDRESS 511-C GREENE ST.
CITY-ST-ZIP KEY WEST FL

TITLE S ☒ DELETE
NAME BROWN, BARBARA D.
STREET ADDRESS 511-C GREENE STREET
CITY-ST-ZIP KEY WEST FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPT ☒ Change ☐ Addition
1.2 NAME Brown, Benjamin L.
1.3 STREET ADDRESS 511-C Greene St.
1.4 CITY-ST-ZIP Key West, FL 33040

2.1 TITLE DVP ☒ Change ☒ Addition
2.2 NAME Brown, Ben L. Jr.
2.3 STREET ADDRESS 511-C Greene St.
2.4 CITY-ST-ZIP Key West, FL 33040

3.1 TITLE S ☒ Change ☒ Addition
3.2 NAME Neal, Monte
3.3 STREET ADDRESS 511-C Greene St.
3.4 CITY-ST-ZIP Key West, FL 33040

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 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

Benjamin L. Brown

3/24/98 4/15/98

CR2E034 (10/97)