File on or before May 1, 1998 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE FILED Sandra B. Mortham ANNUAL REPORT Secretary of State 1998 **DIVISION OF CORPORATIONS** 99 APD - 1 PH 4: 00 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE Name and Mailing Address of Limited Llability Company **DOCUMENT #** M95000000216 1a. Principal Place of Business Address MCKENZIE CHECK ADVANCE OF FLORIDA, L.C. P.O. BOX 1479 650 25TH STREET, 5TH FLOOR CLEVELAND TN 37364-1479 CLEVELAND TN 37320 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 3a. State of Formation 07/13/1995 TNSuite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number Applied For City & State City & State 62-1607852 Not Applicable 5. Date of Last Report 6. Certificate of Status Desired Country Zip Zip Country \$8.75 Additional Fee Required 05/05/1997 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office NRAI SERVICES, INC. Street Address (P.O. Box Number Is Not Acceptable) 526 E. PARK AVENUE TALLAHASSEE FL 32301 000002482220---7 -04/08/98--01023--021 Suite, Apt. #, etc. ****188.75 ****188.75 City Zip Code 9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company 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 affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. SIGNATURE DATE (Registered Agent Accepting Appointment) (NOTE Registered Agent signature required when reinstating) 10. Title Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM MCKENZIE, STEVE A 650 25TH STREET, 5TH FLOOR CLEVELAND TN 37364 650 25th STREET, 5th FLOOR CLEVELAND, TN 37364 650 25th STREET, 5TH FLOOR CLEVELAND, TN 37364 MGRN McKenzie, Brenda G. Scoggins, J. Edward MGRM (X) 11-(0

attachment with an address.

S # 1/12 3 YPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

11. Ido 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trystee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an

Daytime Phone #