

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 17, 2003 8:00 am
Secretary of State

02-10-2003 90083 001 *1,050.00

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DOCUMENT # P02000089304

1. Entity Name
FIDELITY CREDIT FINANCE COMPANY, INC.



Principal Place of Business
**1290 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33334**

Mailing Address
**1290 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33334**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number

47-0883196

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATE ACCESS, INC.
238 EAST 6TH AVENUE
TALLAHASSEE FL 32303**

Name

DAVID A HOINES

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

1290 E OAKLAND PARK RD

City

FT LAUDERDALE

FL

Zip Code

33334

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and if applicable.

(NOTE: Registered Agent signature required when reinstating)

DAVID A HOINES

1/3/03

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
HOINES, DAVID A
1290 E OAKLAND PARK BLVD
FT LAUDERDALE FL 33334**

☐ Delete

TITLE
NAME
STREET ADDRESS
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12. I hereby certify that the information supplied in this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, but not other like empowered.

SIGNATURE:

DAVID A HOINES

1/3/03

9545619500

Daytime Phone #

CR2E034 (10/02)