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**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT O- STATE Sanora B. Morthan Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P08315 (4)  ALRENCO, INC.					] <b>)D]</b> [] <b>] D</b> [] <b>] D</b> [] <b>D</b> []	<b>881 B</b> )jj; 81 <b>8</b> jj 81817 81817	<b>Gjöjj Segal O</b> ndre o
Principal Piace of Business 1736 E. MAIN STREET P. O. BOX 85 NEW ALBANY IN 47150		Mailing Address 1736 E. MAIN STREET P. O. BOX 85 NEW ALBANY IN 47150		3. Date Incorporated or Qualified 3a. Date of Last Report			
Personal Di	lace of Business				12/06/1985	05/01/	
- гластрагет 	iace or business	2a. Mailing Address 26			4. FEI Number		Applied For
Suite, Apt.	#, etc	Suite, Apt. #, etc.			35-1480655		Not Applica
O+ 8 0++		[27]			5. Certificate of Status Desired		75 Additional ee Required
Orty & State	€	City & State			6. Election Campaign Financing	\$5	.00 May Be
Zıp	Country	<b>[28]</b> Zq.	Country		Trust Fund Contribution	☐ Ad	ded to Fees
	25	29	30		This corporation has liability for Florida Statutes	intangible tax under :- 🗀 No	s 199.032,
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New R		
07.00	0000171011 0007711		81	Name			
	RPORATION SYSTEM 5. PINE ISLAND ROAD		82	Street Add	ress (P.O. Box Number is Not Acceptab	ole)	·
	ATION FL 33324		83				
			84	City		L- 1 1 - 1	Zip Code
familiar wit	to the provisions of Sections 607,050 led agent, or both, in the State of Flo th, and accept the obligations of, Sc	02 and 607,1508. Florida Staturida. Such change was a ithor ction 607,0505. Florida Statute	ites, the above nazed by the corpo	artied corpor iration's boa	ration submits this statement for the pur rd of directors. Thereby accept the appo	pose of changing it ointment as register	s registered of ed agent. I am
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SIGNATURE:

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