FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P11047** **(8)**

1. Corporation Name

AMERICAN CAPITAL RESOURCES COMPANY OF DELAWARE

Principal Place of Business	Mailing Address
7651 ASHLEY PARK CT SUITE 408 ORLANDO FL 32835 US	7651 ASHLEY PARK CT SUITE 408 ORLANDO FL 32835 US

3. Date Incorporated or Qualified: 08/06/1986
3a. Date of Last Report: 02/06/1995

2. Principal Place of Business	2a. Mailing Address
21 7515 PARK SPRINGS CIR	26 7515 PARK SPRINGS CIR.
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 ORLANDO, FL	City & State 28 ORLANDO, FL
Zip 24 32835 / Country 25 ORANGE	Zip 29 32835 / Country 30 ORANGE

4. FEI Number: 59-2690826 ☐ 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

JULIAN, M. DUANE
7651 ASHLEY PARK COURT
SUITE 408
ORLANDO FL 32835

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable): 7515 PARK SPRINGS CIRCLE

83

84 City: ORLANDO, FL 85 Zip Code: 32835

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: M. Duane Julian 1/15/96
Signature of the above named registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	JULIAN, M. DUANE		1.2 NAME		
STREET ADDRESS	7651 ASHLEY PARK COURT, #408		1.3 STREET ADDRESS	7515 PARK SPRINGS CIRCLE	
CITY-ST-ZIP	ORLANDO FL		1.4 CITY-ST-ZIP	ORLANDO, FL 32835	
TITLE	VA	☐ DELETE	2.1 TITLE	V	☒ Change ☐ Addition
NAME	JULIAN, DEBRA A		2.2 NAME		
STREET ADDRESS	7651 ASHLEY PARK COURT, #408		2.3 STREET ADDRESS	7515 PARK SPRINGS CIRCLE	
CITY-ST-ZIP	ORLANDO FL		2.4 CITY-ST-ZIP	ORLANDO, FL 32835	
TITLE	ST	☐ DELETE	3.1 TITLE		☒ Change ☐ Addition
NAME	BURNS, MARIAN G		3.2 NAME		
STREET ADDRESS	7651 ASHLEY PARK COURT, #408		3.3 STREET ADDRESS	1334 KURUME COURT	
CITY-ST-ZIP	ORLANDO FL		3.4 CITY-ST-ZIP	ORLANDO, FL 32818	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: M. Duane Julian M. DUANE JULIAN 1/15/96 (407)295-5336
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #