

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

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P25739** (4)
1. Corporation Name
JAGUAR CREDIT CORPORATION

Principal Place of Business 9009 CAROTHERS PKY FRANKLIN TN 37067	Mailing Address P.O. BOX 660100 FRANKLIN TN 37068-0100
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 9009 Carothers Pkwy Suite, Apt #, etc. 22 City & State 23 Franklin, TN Zip 24 37067 Country 25 Williamson		2a. Mailing Address 26 Suite, Apt #, etc. 27 City & State 28 Zip 29 Country 30		3. Date Incorporated or Qualified 08/24/1989	
4. FEI Number 22-2992409		Applied For <input type="checkbox"/> Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		

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

Signature, typed or printed name of 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	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NYNES, THOMAS N	1.2 NAME	
STREET ADDRESS	9009 CAROTHERS PKY	1.3 STREET ADDRESS	
CITY-ST-ZIP	FRANKLIN TN 37067	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MENZYK, ANDREW L	2.2 NAME	Richard Pauley
STREET ADDRESS	9009 CAROTHERS PKY	2.3 STREET ADDRESS	9009 Carothers Pkwy.
CITY-ST-ZIP	FRANKLIN TN 37067	2.4 CITY-ST-ZIP	Franklin, TN 37067
TITLE	S	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, HURLEY D	3.2 NAME	
STREET ADDRESS	THE AMERICAN RD	3.3 STREET ADDRESS	
CITY-ST-ZIP	DEARBORN MI	3.4 CITY-ST-ZIP	
TITLE	S	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAMIREZ, RENE	4.2 NAME	
STREET ADDRESS	ONE BURTON HILLS BLVD, SUITE 350	4.3 STREET ADDRESS	
CITY-ST-ZIP	NASHVILLE TN	4.4 CITY-ST-ZIP	
TITLE	T	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BURKHARD, JOHN P	5.2 NAME	
STREET ADDRESS	THE AMERICAN ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	DEARBORN MI	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(f), 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:

René Ramirez

CR2E034 (10/97)