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Feb 02 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 # P27534

(7)

1. Corporation Name
CREDITHRIFT OF AMERICA, INC.

Principal Place of Business
601 N.W. SECOND STREET
EVANSVILLE IN 47708

Mailing Address
601 N.W. SECOND STREET
EVANSVILLE IN 47708



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
01/02/1990

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	35-1143068	Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24. Country	29. Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	Yes No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-captioned 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	POCE	1.1 TITLE	
NAME	GEISSINGER, FREDERICK W	1.2 NAME	
STREET ADDRESS	601 NW 2ND STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	EVANSVILLE IN	1.4 CITY-ST-ZIP	
TITLE	V	2.1 TITLE	VD
NAME	SEELEY, DAVID C	2.2 NAME	Robert A. Cole
STREET ADDRESS	601 N.W. SECOND STREET	2.3 STREET ADDRESS	601 NW 2nd St.
CITY-ST-ZIP	EVANSVILLE IN	2.4 CITY-ST-ZIP	Evansville IN 47708
TITLE	VSD	3.1 TITLE	AS
NAME	SMITH, GARY M	3.2 NAME	Mary R. Deig
STREET ADDRESS	601 NW 2ND ST	3.3 STREET ADDRESS	601 NW 2nd St.
CITY-ST-ZIP	EVANSVILLE IN	3.4 CITY-ST-ZIP	Evansville, IN 47708
TITLE	VD	4.1 TITLE	V
NAME	POELKER, JOHN S	4.2 NAME	Ray W. Sims
STREET ADDRESS	601 N.W. 2ND ST.	4.3 STREET ADDRESS	601 NW 2nd St.
CITY-ST-ZIP	EVANSVILLE IN	4.4 CITY-ST-ZIP	Evansville IN 47708
TITLE	V	5.1 TITLE	
NAME	HANLEY, PHILIP M.	5.2 NAME	
STREET ADDRESS	601 N.W. SECOND STREET	5.3 STREET ADDRESS	
CITY-ST-ZIP	EVANSVILLE IN	5.4 CITY-ST-ZIP	
TITLE	AS	6.1 TITLE	
NAME	LEDBETTER, JEFFREY L	6.2 NAME	
STREET ADDRESS	601 N.W. SECOND STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	EVANSVILLE IN	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)(c), 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: Mary R. Deig Mary R. Deig 1/21/98 8124685568

CR2E034 (10/97)