

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P30176 (2)

1. Corporation Name

FINANCIAL PROTECTION MARKETING, INC.



Principal Place of Business

7440 N SHADELAND AVE.
P.O. BOX 501670
INDIANAPOLIS IN 46250-3670

Mailing Address

7440 N SHADELAND AVE.
P.O. BOX 501670
INDIANAPOLIS IN 46250-3670

2. Principal Place of Business

21 5155 N. Shadeland Avenue

Street Address

22 City & State

23 Indianapolis, IN

24 46226 25 Marion

2a. Mailing Address

26 PO Box 501670

Street Address

27 City & State

28 Indianapolis, IN

29 46250 30 Marion

3. Date Incorporated or Qualified
07/12/1990

3a. Date of Last Report
02/08/1995

4. FEI Number
35-1349213

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. 190.032,
Florida Statutes ☐ 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
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 FL Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1502, 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 607.0603, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

12a. NAME
12b. STREET ADDRESS
12c. CITY, STATE, ZIP
12d. TITLE
12e. NAME
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12zy. NAME
12zz. STREET ADDRESS

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-17-96 317-591-7060

CR2E034 (12/95)