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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000020268 (7)

SMITH MOTORS FINANCE COMPANY

Principal Place of Business

Mailing Address

FILED Apr 11 1997 8:00am Secretary of State



3. Date Incorporated or Qualified 03/12/1993 01/23/1996 2. Principal Place of Business 24 Applied For 25 Applied For 26 Applied For 26 Applied For 27 Suite, Apt. #, etc. 3. Date Incorporated or Qualified 01/23/1996 4. FEI Number Applied For Not Applied For Not Applicable Suite, Apt. #, etc. 5. Certificate of Status Desired \$8.75 Additional	4888 W COLON ORLANDO FL 3		4606 W COLONIAL DR ORLANDO FL 32608-8118	1				
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S. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name SMITH, JAMES S 4608 W COLONAL DR CRIANDO FL 32808-8118 82 Street Address (P.O. Box Number is Not Acceptable) 83 Series Address (P.O. Box Number is Not Acceptable) 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 effices or registered agent. or both, in the State of Boxids. Section 607 0505, Florida Statutes. 85 CITY ATTER 86 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 effices or registered agent. In the familiar with and accept the obligations of, Section 607 0505, Florida Statutes. 86 City 87 City Acceptable 87 City Acceptable 88 City Acceptable 89 Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes. The above name remove of provisions submits this statement for the purpose of changing its registered agent a	23 0 26	-) PLI	7	COLPANIA TO THE PARTY OF THE PA	and the same of t			
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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 panged, or on an attachment with an address.

SIGNATURE: