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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

FILED

May 05 1998 8:00am

Secretary of State

Change

Change

☐ Addition

■ Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000045997 (2)

SPEEDY CASH OF ST. MARY'S, INC.

Principal Place of Business Mailing Address **9028 LEM TURNER RD** 6326 103RD ST JACKSONVILLE FL 32208 JACKSONVILLE FL 32210 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/30/1993 2. Principal Place of Business 2a. Mailing Address Applied For 4. FEI Number 58-2062909 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name LYNN, E M 6326 103RD ST Street Address (P.O. Box Number is Not Acceptable) JACKSONVILLE FL 32210 83 City Zip Code 85 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) (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 TITLE Change Addition LYNN, E. MICHAEL NAME 1.2 NAME CR2E034 **4665 TRENDLE LANE** STREET ADDRESS 1.3 STREET ADDRESS JACKSONVILLE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition TITLE NAME RING, DAVID 2.2 NAME 806 GAVERNIE CT. STREET ADDRESS 2.3 STREET ADDRESS **CRESTVIEW FL** CITY-ST-ZIP 2 4 C/TY-ST-Z/P DELETE Change ☐ Addition TITLE 31 THUE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 eath; that I am an officer or director of the corporation or the viceiver 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.

4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

61 DILE

6.2 NAME

DELETE

DELETE