2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment wit

SIGNATURE:

address, with all other like empowered.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 25, 2000 8:00 am Secretary of State DOCUMENT # **P94000033827** TITLE LOANS OF AMERICA. INC. 01-25-2000 90061 022 ***158.75 Mailing Address Principal Place of Business 971 E. TENNESSEE 8601 DUNWOODY PLACE MIAMI FL 32308 SUITE 406 ERRED23 ATLANTA GA 30350-2550 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number Applied For City & State 017 65-0491204 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Pee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CT CORP. SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S PINE ISLAND RD. PLANTATION FL 33324 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so: Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PDC ☐ Change Addition TITLE TITLE ☐ Delete REICH, ROBERT I NAME NAME STREET ADDRESS 8601 DUNWOODY PLACE, SUITE 406 STREET ADDRESS CITY-ST-ZIP ATLANTA GA CITY-ST-7(P SGC Addition ☐ Delete TITLE ☐ Change TITLE MCCLOSKEY, JOHM J NAME 8601 DUNWOODY PL, STE 506 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30350 VTCF ☐ Change ☐ Delete Addition TITLE FIELDS. TERRY E NAME NAMÉ 8601 DUNWOODY PL, STE 406 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30350 ☐ Change ☐ Addition ☐ Delete TITLE TITLE WALLACE, RICHARD C NAME NAME STREET ADDRESS STREET ADDRESS 8601 DUNWOODY PL, STE 406 CITY-ST-ZIP CITY-ST-ZIP ATLANTA GA 30350 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Delete Addition TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 13. I hereby 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 report or supplemental 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 optrustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

(770)

房厅ohn J. McCloskey, Secretary 1/12/2000 552-9840