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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **P94000091700 (2)**

1. Corporation Name

CORVETTE CREDIT CORPORATION

Principal Place of Business	Mailing Address
C/O BAUER. MARIANI. ALFORD & BARBER 1550 SOUTH HIGHLAND AVENUE CLEARWATER FL 34616	C/O BAUER. MARIANI. ALFORD & BARBER 1550 SOUTH HIGHLAND AVENUE CLEARWATER FL 34616

3. Date Incorporated or Qualified: 12/19/1994
3a. Date of Last Report: 06/12/1995

2. Principal Place of Business	2a. Mailing Address
21 1426 Gulf-to-Bay Blvd	26 1426 Gulf-to-Bay Blvd.
Suite, Apt. #, etc. 22 C	Suite, Apt. #, etc. 27 C
City & State 23 Clearwater, FL	City & State 28 Clearwater, FC
Zip 24 34615 Country 25 USA	Zip 29 34615 Country 30 USA

4. FEI Number: APPLIED FOR 59-3319516 ☐ 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 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MARIANI, BARBARA E
1550 SOUTH HIGHLAND AVENUE
CLEARWATER FL 34616

10. Name and Address of New Registered Agent

81 Name: James G. Crist
82 Street Address (P.O. Box Number is Not Acceptable): 1426 Gulf-to-Bay Blvd.
83: Suite C
84 City: Clearwater, FL **FL** 85 Zip Code: 34615

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] James G. Crist 4/22/96
(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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRIST, JAMES G 1550 S. HIGHLAND AVENUE CLEARWATER FL 34616	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Director, President Crist, James G. 1426 Gulf-to Bay Blvd., Suite C Clearwater FL 34615 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAUER, ROBERT O JR. 1550 S. HIGHLAND AVENUE CLEARWATER FL 34616	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Director, Vice President Bauer, Robert O. Jr 1550 S. Highland Avenue Clearwater, FL 34616 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BURDETTE, JOSEPH 1550 S. HIGHLAND AVENUE CLEARWATER FL 34616	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	Director, Vice President Paul McNeeley 1426 Gulf-to Bay Blvd., Suite C Clearwater, FL 34615 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	Director Laurel Beatty 1426 Gulf-to-Bay Blvd., Suite C Clearwater, FL 34615 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: [signature] James G. Crist 4/22/96 813-585-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)