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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

DOCUMENT # P95000050545 (9)

CASH AND TITLE, INC.

- the section of the

SIGNATURE:

FILED May 04, 1998 8:00 am Secretary of State

Daytime Phone #

0032812



Principal Place	of Business	Mailing Address				
2021 ART MUSEUM DRIVE		2021 ART MUSEUM DRIVE				
SUITE #140		SUITE #140				
JACKSONVILLE FL 32207		JACKSONVILLE FL 32207			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					06/28/1995	
2. Principal Pla	ace of Business	2a. Mailing Address			4, FEI Number Applied For	
!		26			59-3323716 Not Applicable	
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional	
.1					Fee Required	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be	
!		28	28		Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible	
4	25	29 30	30		Personal Property Tax due June 30. Yes No	
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	
WELDON, JOHN T				81 Name		
	1 ART MUSEUM DRIVE	82		0	Addition (D.O. Double sharin Not Appoint blo)	
	TE #140	62 Street		Street	Address (P.O. Box Number is Not Acceptable)	
	CKSONVILLE FL 32207	ŀ		 -		
	NOUNVILLE FL SZZU/		L	l		
	4		84	City	FL 85 Zip Code	
A second of the control of the contr						
office or registered agent, of 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 add accept the obligations of, Section 607.0505, Florida Statutes.						
agent. Tarri farminar with the configurations of, section our code, monda diditates.						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	DELETE	11 TITLE	_	Change Addition	
NAME	WELDON, JOHN T	_	1.2 NAME		0.1.0.1	
STREET ADDRESS 1918 SEA OATS DRIVE					2021 Art MUSEUM Drive Suite 140	
ATI ANTIC DEACH EL 20222		İ	1.4 CITY-ST-ZIP		Troll-willE KL 3VVO7	
CITY-ST-ZIP	V	DELETE	2.1 TITLE	31 - ZIP	Jackson Ville, KL 3 VO7 Change Addition	
TITLE	WEIDON SEAN I				<u> </u>	
NAME	WELDON, SEAN J		2.2 NAME		20 AL Ant MUSEUM DRIVE SUHE 140	
STREET ADDRESS	801 2ND ST		2.3 STREET ADDRESS		JOSI Ant MUSEUM DRIVE SVITE 140 TACKSONVILLE, FL 34 TOT IAN T. WELDON Change Addition JOSI Ant MUSEUM DRIVE SVITE 140	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP	Change Addition	
TITLE	V	☐ DELETE	3.1 TITLE		IAN T. WELDON Schange Maddition	
NAME	WELDON, JAN T		3.2 NAME		2021 Aat MUSEUM DaIVE SUITE 140	
STREET ADDRESS	801 2ND ST		3.3 STREET ADDR		11. 11.16	
CITY - ST - ZIP	NEPTUNE BEACH FL 32266		3.4. CITY-	ST-ZIP	Spellsorville Pl 34voj	
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP		!	4.4 CITY-	ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS				T ADDRESS		
Į.			5.4 CITY-			
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	<u> </u>	Change Addition	
			6.2 NAME			
NAME				T ADDRESS		
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP	artify that the information cumplied with	th this filling does not qualify for	6.4 CITY-	SI-ZIP	ed in Section 119 07(3)(i) Florida Statutes 1 further certify that the information	
14. Thereby certify that the information supplied with this tiling 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 oath; that I am an						
officer or director of the corporation or the receiver of the proposed to execute this report as required by Chapter 607, Horida Statutes; and that my name appears in						
Block 12 or Block 13 if changed, or on an attach tent with an address.						