

2001 UNIFORM BUSINESS REPORT (UBR)

1082

DOCUMENT # P95000069794

1. Entity Name
INTERNATIONAL TITLE LOAN, INC.

Principal Place of Business **Mailing Address**
424 NW 13th STREET 424 NW 13th STREET
GAINESVILLE, FL 32601 GAINESVILLE, FL 32601

FILED
OCT 15 AM 11:49
SECRETARY OF STATE
TALLAHASSEE FLORIDA

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

DO NOT WRITE IN THIS SPACE
05-03-01 91112 050 \$150.00
59-3336421

6. Name and Address of Current Registered Agent **7. Name and Address of New Registered Agent**

JOHNSON, HUNTLEY
228 SW 2ND ST.
GAINESVILLE, FL
32601

Name: JOHN P. Mc DONALD
Street Address (P.O. Box Number is Not Acceptable): 424 NW 13th ST
City: GAINESVILLE FL Zip Code: 32601

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] DATE: 10/4/01

Signature, typed or printed name of individual agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE: D NAME: Mc DONALD, JOHN STREET ADDRESS: 424 NW 13th STREET CITY-ST-ZIP: GAINESVILLE, FL 32601	☐ Delete	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
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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 or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] **John P. McDonald** 9/24/01 (352) 335-1201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/00)

20F2

Director
Uniform Business Reports
Division of Corporations
Tallahassee, FL 32302-1500

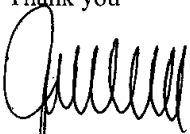
Dear Director,

Thank you for the courtesy allowing the transfer of the \$150.00 payment made to continue the wrong corporation, to the correct one that should have been sent in.

Please transfer this credit to Corporation #P95000069794 International Title Loan, Inc. from Corporation #P00000032758 (copies attached). Enclosed is a check in the amount of \$400.00 to cover the difference to keep active International Title Loan, Inc. together with the newly completed application form

If there are any questions please call me at #352-335-1201

Thank you



John P. McDonald
President