FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

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Mar 13 1997 8:00am
Secretary of State

2000
CORPORATION
ANNUAL REPORT
1997

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

DOCUMENT # **P95000085263 (8)**

1. **SOUTHEAST TITLE LOAN CO. III, INC.**

Principal Office Address:

735 NW 22ND AVENUE
MIAMI FL 33125

Mailing Address:

8601 DUNWOODY PL
STE 406
ATLANTA GA 30350-2550

2. Principal Place of Business:
21 971 East Tennessee
22
23 Tallahassee, FL
24 32308 25 USA

2a. Mailing Address:
26
27
28
29 Zip 30 Country

3. Date Incorporated or Qualified: **11/06/1995**

3a. Date of Last Report: **05/01/1996**

4. FEI Number: **58-2207213**

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

CT CORPORATION SYSTEM
1200 N PINE ISLAND RD.
PLANTATION FL 33224

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to Section 607.0502 and/or 1005, 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 of New Registered Agent

12. OFFICER AND/OR DIRECTOR

☐ DELETE
PSD
AYCOX, RODERICK
8601 DUNWOODY PLACE STE 406
ATLANTA GA 30350

☐ DELETE
☐ DELETE
☐ DELETE
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE
2 NAME
3 STREET ADDRESS
4 CITY-ST-ZIP
5 TITLE ☐ Change ☐ Addition
6 NAME
7 STREET ADDRESS
8 CITY-ST-ZIP
9 TITLE ☐ Change ☐ Addition
10 NAME
11 STREET ADDRESS
12 CITY-ST-ZIP
13 TITLE ☐ Change ☐ Addition
14 NAME
15 STREET ADDRESS
16 CITY-ST-ZIP
17 TITLE ☐ Change ☐ Addition
18 NAME
19 STREET ADDRESS
20 CITY-ST-ZIP
21 TITLE ☐ Change ☐ Addition

CR2E034 (9/96)

14. I hereby 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 12 or 13 with an address.

SIGNATURE: Roderick Aycox, Director 2/27/97 (770) 552-9840

EXECUTIVE SIGNATURE AND TITLE OR AUTHORIZED PERSON SIGNATURE OF OFFICER OR DIRECTOR — DATE — TELEPHONE