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 #

Principal Place of Business

P96000029142 (2)

THE TITLE-CASH CONNECTION, INC.

Mailing Address

FILED May 12 1998 8:00am Secretary of State



2718 W. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33311 2718 W. OAKLAND PARK BLVD. FT. LAUDERDALE FL 33311 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/03/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0650823 21 26 Not Applicable Suite, Apt. #, etc. Suite Ant # etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 26 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent COURTNEY, LARRY C 81 Name 2718 W. OAKLAND PARK BLVD. Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33311 83 City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE __ DELETE 1.1 TITLE Change Addition COURTNEY, LARRY C 1.2 NAME 2718 W. OAKLAND PARK BLVD. STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL 33311 CITY - ST - ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETÉ TITLE 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-2IP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-Z#P 4.4 CITY-ST-ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY ST ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify to indicated on this annual report or suppliency hal annual report is true and according or or director of the conjever or true or empowered to Block 12 or Block 13 if changed or on an artischment with any address. or the examption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information jurate and that my signature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

4/19/98 954 485 12