

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Mar 11 1997 8:00am
Secretary of State

DOCUMENT # **P96000043632 (4)**

1. Corporation Name

SOUTHEAST TITLE LOAN CO., XIII, INC.

Principal Place of Business

**104 EAST THIRD AVENUE
TALLAHASSEE FL 32303**

Mailing Address

**STE. 406, 8601 DUNWOODY PLACE
ATLANTA GA 30350-2550**

3. Date Incorporated or Qualified

3a. Date of Last Report

05/23/1996

4. FEI Number

58-2237626

Applied For

Not Applicable

2. Principal Place of Business

21 971 East Tennessee

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

23 Tallahassee, Florida

24 Zip 32308

25 Country USA

27 City & State

28 City & State

29 Zip

30 Country

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

**CONIGLIO, MICHAEL J
104 EAST THIRD AVENUE
TALLAHASSEE FL 32303**

10. Name and Address of New Registered Agent

81 Name

CT Corporation System

82 Street Address (P.O. Box Number is Not Acceptable)

1200 S. Pine Island Road

83

84 City

Plantation

FL

85 Zip Code
32303

11. Pursuant to the provisions of Sections 607.002 and 607.003, 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

John J. Masters, Assistant Secretary

Signature must be printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

D ☐ DELETE
AYCOX, RODERICK
STE. 406, 8601 DUNWOODY AVE.
ATLANTA GA 30350

☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE President/ Secretary/Director ☐ Change ☒ Addit
12 NAME Roderick Aycox
13 STREET ADDRESS 8601 Dunwoody Ave., Ste 406
14 CITY - ST - ZIP Atlanta, GA 30350 ☐ Change ☐ Addition

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

14. I do 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 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:

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034