## 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

DOCUMENT # P96000043993 (0)

UNITED SERVICES ACCEPTANCE CORPORATION

**FILED** 

Apr 29 1997 8:00am

Secretary of State

Principal Piccle of Business		Mailing Address		T NORTHWOLLINE IDITE BISTIN DOTAL BORNE BOSTE BRITI BIDDO FILLE VETER VETER TITL TOUR		
120 <del>entrance-rd.</del> , suite 1 Pensacola FL 32507		1 <del>30 ENTRANOS RD., SUITE 1</del> PENSACOLA FL 32507-1100				
120 C	thiefs' wby. Sinte	1 120 04	ings' Way, Suitel	3. Date Incorporated or Qualified 05/16/1996	To Qualified    Sa. Date of Last Report   ST   Last Report     Sa. Date of Last Report     Sa. Date of Last Report     Applied For     Not Applicable     Sa. 7 3 5   Not Applicable     Sa. 7 5 Additional     Fee Required     Financing   \$5.00 May Be	
2. Principal P	lace of Business	2a. Mailing Addre		4. FEI Number		Applied For
21	HBOUR	26	gruse	59-33822	35	Not Applicable
Suita Apr.	R, Oto	Suite, Apt. #,	etc.	5. Certificate of Status Desired		
Oily & Shati <b>23</b>	et.	City & State		Election Campaign Financing     Trust Fund Contribution		
Zip	Country	Zip	Country	8. This corporation has liability for	intangible	tax under s. 199.032,
24	25	29	30	Florida Statutes	Yes [	□No

9. Name and Address of Current Registered Agent

KRAWCHUCK, WILLIAM P

120 ENTRANCE RD., SUITE 1

PENSACOLA FL 32507

10. Name and Address of New Registered Agent

Name

81 Name

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

83

83 | 84 | City | FL | 85 | 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 of ever 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. Lamifa with land accept the obligations of, Section 607.0505, Florida Statutes.

agenera	am ra rana: waar and accept the obligations or, Section 607.05	us, Florida Statutes.	ण स	
SIGNATURE	Sign of the style of our professionerum of registered agend and title if applicable	(NOTE: Registered Agent signature required	Lunes, renetation)	DATE
12.	OFFICERS AND DIRECTORS	13,	ADDITIONS/CHANGES TO OFFICER	
THE	DELE			Change Addition
Nata:	Kranchuck, William P.	12 NAME		<u> </u>
S146 F149 086 SS	Kranchuck, Willom P. 415 A Mory Esther CTO FT Walton Beach FL 32545	1.3 STREET ADDRESS		
CHY 51 20	ET Welter Beach EL 22545	1.4 City-St-ZiP		
11.14	VT DELE		<u> </u>	Change Additio
NAME	Kranchiek, Barbase A.	22 NAME		
SPREET ADDRESS	Kranchuck, Barbare A. 415 A. Mary Esten CTO FT Welton Beach, FL 32546	23 STREET ADDRESS		
City St 7	FT welton Beach El Barve	2 4 CITY - ST - ZIP	, \$ -t,	
TELL	DELE		1	Change Additio
NAMI		32 NAME		
\$136-1 An08655		33 STREET ADDRESS		
013 57 72		3 4. CITY-ST-ZIP		
1:1.)	DELE	·		Change Addition
HAME		4 2 NAME		
SIRCHALORESS		43 STHEET ADDRESS		
CHY SI Za				
144	DEAE"	4.4 CHY-ST-ZIP TE 5.1 TITLE		Change Additio
HAME		52 NAME		
STREET AHORESS		53 STREET ADDRESS		1/1/1/10
				7/17/201
Olby 51 7 - 1 III	DELE"	5.4 CITY - ST - ZIP TE 6.1 TITLE		Additio
	L., Dett	<b>■</b>		Fill solution Fill Modition
NAME A LIGHT & MARKET		62 NAME	/M _	
51/8 - 1.4 (08) 5%		63 STREET ADDRESS	Al No Chill Coo	
711Y ST 7 1	1	6.4 CITV. 97. 7IP	# LJF ( ) / (A T) *	

14. Ldo hereby certry that the information supplied with this filing does not qualify for the exemption stated in Section 1/9.07(3)(i), Florida Statutes. I further certify that the information troccated 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 eath; that I am an officer or director of the corporation or the receiver or director of the corporation or the receiver or director of the corporation of the receiver of director of the corporation of the corporation of the receiver of director of the corporation of

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904 453-890)