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Mar 11 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **P96000055223 (7)**

1. Corporation Name
SOUTHEAST TITLE LOAN CO., XXVI, INC.

Principal Place of Business

**104 E. THIRD AVE.
TALLAHASSEE FL 32303**

Mailing Address

**6601 DUNWOODY AVE.
SUITE 406
ATLANTA GA 30350-2550**



3. Date Incorporated or Qualified

06/28/1996

3a. Date of Last Report

4. FEI Number

58-2245186

Applied For

Not Applicable

2. Principal Place of Business

21 971 East Tennessee

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

**22 City & State
23 Tallahassee, Florida**

Suite, Apt. #, etc.

**27 City & State
28**

24 32308

25 USA

29

30

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 E. THIRD AVE.
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 33324

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 provisions of Section 607.0505, Florida Statutes.

John J. Masters, Assistant Secretary

SIGNATURE

Signature, typed or printed name of registered agent and filed if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSD
NAME AYCOX, RODERICK
STREET ADDRESS 8601 DUNWOODY PLACE, STE. 406
CITY-ST-ZIP ATLANTA GA 30350

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 2/27/96 (770) 552-9840

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)