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Mar 12 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 # P96000098112 (1)

1. Corporation Name

CASH LOANS OF SARASOTA, INC.



Principal Place of Business

Mailing Address

104 EAST THIRD AVENUE  
TALLAHASSEE FL 32303

SUITE 406  
8601 DUNWOODY PLACE  
ATLANTA GA 30350-2550

2. Principal Place of Business

2a. Mailing Address

21 971 East Tennessee

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Tallahassee, Florida

28 City & State

Zip

Country

Zip

Country

24 32308

25 USA

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

3a. Date of Last Report

12/04/1996

4. FEI Number

Applied For

65-0713351

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

81 Name

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

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 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

Signature and printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

TITLE

1.2 NAME ☐ Change ☐ Addition

NAME

1.3 STREET ADDRESS

STREET ADDRESS

1.4 CITY- ST- ZIP

CITY- ST- ZIP

TITLE

2.1 TITLE ☐ Change ☐ Addition

NAME

2.2 NAME

STREET ADDRESS

2.3 STREET ADDRESS

CITY- ST- ZIP

2.4 CITY- ST- ZIP

TITLE

3.1 TITLE ☐ Change ☐ Addition

NAME

3.2 NAME

STREET ADDRESS

3.3 STREET ADDRESS

CITY- ST- ZIP

3.4 CITY- ST- ZIP

TITLE

4.1 TITLE ☐ Change ☐ Addition

NAME

4.2 NAME

STREET ADDRESS

4.3 STREET ADDRESS

CITY- ST- ZIP

4.4 CITY- ST- ZIP

TITLE

5.1 TITLE ☐ Change ☐ Addition

NAME

5.2 NAME

STREET ADDRESS

5.3 STREET ADDRESS

CITY- ST- ZIP

5.4 CITY- ST- ZIP

TITLE

6.1 TITLE ☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY- ST- ZIP

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, unchanged, 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 # 0010010

CR2E034 (9/96)