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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000103487 (0) DOCUMENT #

AGF TITLE LOANS, INC.

Mailing Address

FILED Apr 20 1998 8:00am Secretary of State



Principal Place of Business 7 NEW WARRINGTON ROAD 7 NEW WARRINGTON ROAD PENSACOLA FL \$2507 PENSACOLA FL 32507 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/20/1996 2. Principal Place of Business

5// E. Fair field 2a. Mailing Address 4. FEI Number Applied For 5 // E. Suite, Apt #, etc. 59-3422296 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Yensaco 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible 25 ESCAMBIA 30 ESCAM biA Personal Property Tax due June 30. X Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PARKERSON, OTTO E 7 NEW WARRINGTON ROAD Street Address (P.O. Box Number is Not Acceptable) **B2** PENSACOLA FL 32507 83 City 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 Safe of Torida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiarly if it 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 1.1 TITLE Change Addition PARKERSON, OTTO E MAME 1.2 NAME T NEW-WARRINGTON ROAD 511 E. Fairfield STREET ADDRESS 1.3 STREET ADDRESS Pensacola, Fl. 32503 PENSACOLA FL 32507 CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE DELETE 4.1 TITLE ☐ Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY - ST - ZIP Change DELETE Addition TITLE 51 THLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

14. I 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 en address.

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