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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000066764 (6)

NATIONS TITLE LOAN OF TAMPA, INC.

Principal Place of Business	Mailing Address
400 S. DIXIE HWY., STE. 320 - THE ARBOR BOCA RATON FL 33432	400 S. DIXIE HWY., STE. 320 - THE ARBOR BOCA RATON FL 33432

FILED Apr 28 1998 8:00am Secretary of State



400 \$. DIXIE BOCA RATON	HWY STE. 320 - THE ARBOR FL 33432	400 S. DIXIE HWY S BOCA RATON FL 334		ie ai	RBOR	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/01/1997	
· ·	lace of Business	2a. Mailing Address			·	4. FEI Number Applied For	
21		26	<u></u>			59-346/45D Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required	
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	Zip Country 30			,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Registered Agent	
GE	SCHEIDT, RICHARD A	··		81	Name		
400	400 S. DIXIE HWY., STE. 320 - THE ARBOR BOCA RATON FL 33432			82	Street /	Address (P.O. Box Number is Not Acceptable)	
30	ON HALLOIT I E OUTUE			63			
				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, typed or printed name of registered.			d Age	ant signeture	required when reinstating) DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	0	☐ DELETE	1.1 T(Change Addition	
NAME	GESCHEIDT, RICHARD A		1.2 N				
STREET ADDRESS	400 S. DIXIE HWY., STE. 32	20 - THE ARBOR	1		ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33432	DELETE			ST-ZIP	Change Addition	
TITLE		☐ DETEIE	2.1 Ti			Citalige Cit Addition	
NAME			2.2 N				
STREET ADDRESS CITY-ST-ZIP			1		ADDRESS ST-ZIP	[
TITLE		DELETE	3.1 Ti		51- ZIP	Change Addition	
NAME			3.2 N		ļ		
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			3.4. C)TY-5	ST-ZIP		
TITLE		DELETE	4 1 TI	TLE		☐ Change ☐ Addition	
NAME			4.2 N	IAME	Ì		
STREET ADDRESS			4.3 ST	TAEET	ADDRESS		
CFTY-ST-ZIP			4.4 0	ITY-S	ST-ZIP		
TITLE		☐ DELETE	5.1 Ti			Change Addition	
NAME			5.2 N/				
STREET ADDRESS					ADDRESS	.	
CITY-ST-ZIP		T AFFECT			ST-ZIP		
TITLE		DELETE	6.1 TI			Change Addition	
NAME			6.2 N				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			6.4 CI	TY-\$	37 - ZIP		

14. Thereby 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.