

APR 30 1999 FRI 02:56 PM

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

05-17-1999 0033 006 50.00 P97000019241 FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

99 SEP -9 PM 3:00

DOCUMENT # P97000091968

1. Corporation Name

1ST S.E. ACCEPTANCE CORP.

Principal Place of Business

Mailing Address

804 Lake Amick Dr. Niceville, Fl 32578

804 Lake Amick Dr. Niceville, Fl 32578

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Changed: 10/21/97

4. FEI Number: 59-3474595 Applied For: 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

7. This corporation owes the current year Intangible Personal Property Tax: [] Yes [] No

8. Name and Address of New Registered Agent

2. Principal Place of Business: 1200 N. Eglin Pkwy, Suite, Apt. #, etc.

2a. Mailing Address: P.O. Box 558, Suite, Apt. #, etc.

City & State: Shalimar, Florida, Zip: 32579, Country: Okaloosa

City & State: Shalimar, Florida, Zip: 32579, Country: Okaloosa

81 Name, 82 Street Address (P.O. Box Number is Not Acceptable), 83, 84 City, 85 Zip Code

Daniel E. Bell, Jr. 804 Lake Amick Drive Niceville, Fl 32578

11. Pursuant to the provisions of Sections 607.0522 and 607.1508, Florida Statutes, the above-named corporation submits the 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 607.0526, Florida Statutes.

SIGNATURE: Signature, type or printed name of registered agent and fee if applicable. (NOTE: Registered Agent's signature may be in the form of a stamp.)

Table with columns for OFFICERS AND DIRECTORS and ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for title, name, street address, city, state, zip, and delete checkboxes.

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 my address, with all other filers empowered.

SIGNATURE: DANIELE BELL, JR. 4/30/99 850-729-9199