2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2001 8:00 am
Secretary of State
03-13-2001 90323 004 ***158.75

DOCUMENT # P98000003622 ✓

1. Entity Name
Cash Mart America, Inc. ✓

Principal Place of Business
2512 N. Washington Blvd
Sarasota, FL 34234

Mailing Address
1444 First St.

D0025047

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2155 E. University	2155 E. University
Suite, Apt. #, etc. Ste. 211	Suite, Apt. #, etc. Ste. 211
City & State Tempe, AZ	City & State Tempe, AZ
Zip 85281 Country U.S.	Zip 85281 Country U.S.

4. FEI Number 06 1505016 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

Palmer, Allyson
1444 First Street
Sarasota, FL 34236

7. Name and Address of New Registered Agent

Name Doreen Coffey
Street Address (P.O. Box Number is Not Acceptable) 5603 E. Colonial Drive
Orlando
City FL Zip Code 32807

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE Doreen Coffey 3/5/01
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Vick, Maurice P.O. Box 6119 Sarasota, FL 34278	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/VP/T/S Curtis J. Billups 51089 W. Papago Rd. Maricopa, AZ 85239	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Palmer, Ray P.O. Box 6119 Sarasota, FL 34278	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Vick, Charlotte P.O. Box 6119 Sarasota, FL 34278	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Palmer, Susan P.O. Box 6119 Sarasota, FL 34278	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (11/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Curtis J. Billups Curtis J. Billups 03-05-01 480-929-0944
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

AD