**PROFIT** CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P98000053635

	NE TITLE LOAN CO., INC.	(III) Mailing Address								
Principal Place	e of prisivess	P.O. BOX 483			}	•				
P.O. BOX 483 AUBURNDALE I	FL 33823	AUBURNDALE FL 33823			i					
					[	DO NOT WR		SPACE		7
					المستقاله	3. Date Incorporated or Qualifed 06/16/1998	· · · · · · · · · · · · · · · · · · ·			
2. Principal P	lace of Business	2a. Mailing Address		A. Since		4. FEI Number	an		Applied For	
21		26		Litter		59-35169	90		Not Applicable	i
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	- A	T	İ	5. Certificate of Status Desired			Additional Regulated	1
22		27		_		<del></del>	<del></del>			ł
City & State	le .	City & State	•		- CE 1	Election Campaign Financing     Trust Energ Contribution			O May-Ele. d to Fee:i	-
23	Country	28 Zip	Coun	inv -	<u>&gt;</u>	8. This conversion owes the cur	rent waar Inte		0 10 1 00:1	
Zip	[25]	29	30	~,	- 1	Personal Property Tax.	icin you wa	Yes	□No	
24	9. Name and Address of Curre		1301		<u>-</u> -	10. Name and Address of New	Registered /			Ì
		,		1 Name	<del></del>					
UNGF	RAM, CAROL		ļ.				ablat			
360	BERKLEY ROAD		['	32 Street	t Addiress	(P.O. Box Number is Not Accept	apie)			l
AUB	URNDALE FL 33823		la la	33						l
			L.					7277		l
			- }'	34 City			FL	85   Zig	Code	1
11. Pursuant office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblici	02 and 607.1508, Florida Statul of Florida. Such change was a ations of Section 607.0505. Flo	tes, the about the control of the co	ove-named by the corp	d comora coration's	tion submits this statement for the board of directors. I hereby acce	purpose of	changing i Itnient as	ts registered registered	
office of reagent, I as	egistered agent, or both, in the State in familiar with, and accept the oblig-	of Florida. Such change was a ations of, Section 607.0505, Fig.	rida Statut	es.	OCH BUCHTS	on reinstading)	purpose of a pt the appoin			100
office of reagent. I as SIGNATURE	egistored agent, or both, in the State in familiar with, and accept the oblig- Signature, typad or printed name of registered ag- OFFICERS A	of Florida, Such change was a ations of, Section 607.0505, Fice of and title if applicable. (NOT)  ND DIRECTORS	Registered A	geni syrature	OCH BUCHTS	odaro di directora. Prioretty asset	purpose of a pt the appoin	D DIRECT	TORS IN 12	1001
office of rappent. 1 at SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig- Signature, typed or printed name of registered ag  OFFICERS A	of Florida. Such change was a ations of, Section 607.0505, Fig.	Registered A	geni synature	OCH BUCHTS	on reinstading)	purpose of a pt the appoin		FORS IN 12	144,000
office of reasons. I assent. I assen	egistored agent, or both, in the State in familiar with, and accept the oblig- Signature, typad or printed name of registered ag- OFFICERS AI PD INGRAM, CAROL	of Florida, Such change was a ations of, Section 607.0505, Fice of and title if applicable. (NOT)  ND DIRECTORS	Registered A 13. 1.1 TTTL 1.2 NAM	gent signature	required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	TORS IN 12	004 144 1001
Office or ragent. I at SIGNATURE  12.  TITLE  NAME  STREET, ADDRESS	egistored agent, or both, in the State in familiar with, and accept the oblig- Signature, spead or printed name of registered ag- OFFICERS AI PD INGRAM, CAROL 960 BERKLEY ROAD	of Florida, Such change was a ations of, Section 607.0505, Fice of and title if applicable. (NOT)  ND DIRECTORS	E Registered A 13. 1.1 TITL 12 NAM 13 STR	gent signature  E  E  FET ADDRESS	required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	TORS IN 12	2007 114 1003
Office Or najent. I all SIGNATURE  12.  TITLE  NAME  STREET. NOORESS  CITY-ST-ZIP	egistered agent, or both, in the State in familiar with, and accept the obliging of the obligation of the obliging of the obli	of Florida, Sucion change was a ations of, Section 607.0505, Fic on and 90e if applicable. (NOT)  NO DIRECTORS	E Registered A 13. 1.1 TITL 12 NAM 13 STR 1.4 CFI	geni agrature  E  E  FET ADDRESS '-ST-ZIP	required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72	CD2E094 (44,000)
Office of ready not agent. I as SIGNATURE  12.  TIPLE  NAME  STREET ADDRESS  CITY-ST- ZIP  TITLE	egistered agent, or both, in the State in familiar with, and accept the oblig:  Signature, typed or printed name of registered agent PD  INGRAM, CAROL  960 BERKLEY ROAD  AUBURNDALE FL 33823  VPD	of Florida, Such change was a ations of, Section 607.0505, Fice of and title if applicable. (NOT)  ND DIRECTORS	E Registered A 13. 1.4 TITL 12 NAM 13 STR 1.4 CFY	geni sgrature E E E E E T ADDRESS	required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72	CD2E024 744 1003
Office of realization of the algent. I all SIGNATURE  12.  TITLE NAME  STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State in familiar with, and accept the oblig:  Signature, typed or printed name of registered agent PD  INGRAM, CAROL  960 BERKLEY ROAD  AUBURNDALE FL 33823  VPD  INGRAM, BILL J	of Florida, Sucion change was a ations of, Section 607.0505, Fic on and 90e if applicable. (NOT)  NO DIRECTORS	E Registered A  1.3. 1.4 TITL 1.2 NAM 1.3 STR 1.4 CFTM 2.1 TITL 2.2 NAM	gent signature  E  E  E  E  T  ST-ZIP  E	required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72	CD0E004 144 1001
Office of it algebra of the algebra of the street address city-st. Zip title name street address city-st. Zip title name street address street address street address.	PD INGRAM, CAROL  960 BERKLEY ROAD  NGRAM, BILL J  960 BERKLEY ROAD  AUBURNDALE FL 33823  VPD INGRAM, BILL J  960 BERKLEY ROAD	of Florida, Sucion change was a ations of, Section 607.0505, Fic on and 90e if applicable. (NOT)  NO DIRECTORS	E Repistered A  13.  1.1 TITL  1.2 NAM  1.3 STR  2.1 TITL  2.2 NAM  2.3 STR	gent agretive E E E E E E E E T ADDRESS E E E T ADDRESS	required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72	CD2E094 (44,003)
Office of realization of the algent. I all SIGNATURE  12.  TITLE NAME  STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State in familiar with, and accept the oblig:  Signature, typed or printed name of registered agent PD  INGRAM, CAROL  960 BERKLEY ROAD  AUBURNDALE FL 33823  VPD  INGRAM, BILL J	of Florida, Sucion change was a ations of, Section 607.0505, Fic on and 90e if applicable. (NOT)  NO DIRECTORS	E Repistered A  13.  1.1 TITL  1.2 NAM  1.3 STR  2.1 TITL  2.2 NAM  2.3 STR	gent symbolic E E E FET ADDRESSST-ZIP E E E FET ADDRESS	required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72  Acdition	CD0E004 (44 Mo)
Office of ready of the system. I all signature 12.  TITLE NAME STREET ADDRESS CITY-ST- ZIP TITLE NAME STREET ADDRESS CITY-ST- ZIP STREET ADDRESS CITY-ST- ZIP	PD INGRAM, CAROL 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823	of Fonda. Such change was a ations of, Section 607.0505, Fiden and 906 if applicable. (NOT)  NO DIRECTORS  DELETE	Projectored A  13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 21 TITL 22 NAM 2.3 STR 2.4 CITY	gent symbols  E E E FET ADDRESS  -ST-ZP E E E FET ADDRESS  /-ST-ZP E E E E E E E E E E E E E E E E E E E	required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72  Ac dition	CD0E004 (44 (00)
Office of it algent. I all signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST- ZIP  TITLE  HAME  STREET ADDRESS  CITY-ST- ZIP  TITLE  TITLE  TREET ADDRESS  CITY-ST- ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE	PD INGRAM, CARCAL 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD	of Fonda. Such change was a ations of, Section 607.0505, Fiden and 906 if applicable. (NOT)  NO DIRECTORS  DELETE	Registered A  13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 22 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM	gent symbols  E E E FET ADDRESS  -ST-ZP E E E FET ADDRESS  /-ST-ZP E E E E E E E E E E E E E E E E E E E	p required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72  Ac dition	CD3E094 /44/003
Office of it algorithms of the algorithms of the street address city-st-zip title hame street address city-st-zip title hame street address city-st-zip title hame street address street address street address street address	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL	of Fonda. Such change was a ations of, Section 607.0505, Fiden and 906 if applicable. (NOT)  NO DIRECTORS  DELETE	Registered A  13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 22 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.3 STR	geni syrenive  E  E  E  FET ADDRESS  -ST-ZIP  E  E  E  E  E  T  T  T  T  T  T  T  T	p required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72  Addition  Addition	000000
Office of ready of the agent. I as signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	of Fonda. Such change was a ations of, Section 607.0505, Fiden and 906 if applicable. (NOT)  NO DIRECTORS  DELETE	Registered A  13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 22 NAM 2.3 STR 2.4 CITY 3.1 TITL 3.2 NAM 3.3 STR 3.3 STR	geni symbore  E  E  E  E  E  E  E  E  E  E  E  E  E	p required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72  Addition  Addition	CD0E004 (44 000)
Office of ready of the agent. I as signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	of Fonda. Such change was a ations of, Section 607.0505, Fig. (NOT)  ON DIRECTORS  DELETE	Registered A  13. 1.1 TITL 12 NAM 13 STR 14 CITY 22 NAM 23 STR 3.1 TITL 32 NAM 33 STR 34 CITY 31 TITL 32 NAM 33 STR 34 CITY 34 CITY 34 CITY 34 CITY 35 TITL 36 NAM 36 STR 36 CITY 36 CITY 37 TITL 37 NAM 38 STR 38 CITY 38 CIT	geni syrahara  E E E E E E E E E E E E E E E E E E	p required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72  Addition  Addition	ODSE004 144 1001
Office of ready of the agent. I as signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	of Fonda. Such change was a ations of, Section 607.0505, Fig. (NOT)  ON DIRECTORS  DELETE	I Registered A  13. 1.1 TITL 12 NAM 13 STR 14 CIPY 22 NAM 23 STR 2.4 CIPY 33 TITL 32 NAM 33 STR 34 CIPY 4.1 TITL 4.2 NAM	geni syrahara  E E E E E E E E E E E E E E E E E E	programmed with	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 72  Addition  Addition	0000000
Office of ready of the algent. I all signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	of Forman, Such change was a attentions of, Section 607.0505, Fic and sole if applicable. (NO) IND DIRECTORS  DELETE  DELETE	I Registered A  13. 1.1 TITL 12 NAM 13 STR 14 CIPY 22 NAM 23 STR 2.4 CIPY 33 TITL 32 NAM 33 STR 34 CIPY 4.1 TITL 4.2 NAM	geni syrenare  E E E E E E E E E E E E E E E E E E	programmed with	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 12  Addition  Addition	0000014440001
Office of ready of the algebra of th	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	of Fonda. Such change was a ations of, Section 607.0505, Fig. (NOT)  ON DIRECTORS  DELETE	FROGESTICA STATE OF THE STATE O	gent supreture  E E E E E E E E E E E E E E E E E E	programmed with	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 12  Addition  Addition	CD2E024 /44 (00)
Office of ready of the agent. I as signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  CITY-ST-ZIP  CITY-ST-ZIP	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	of Forman, Such change was a attentions of, Section 607.0505, Fic and sole if applicable. (NO) IND DIRECTORS  DELETE  DELETE	FROGERITOR A  13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 21 TITL 22 NAM 2.3 STR 2.4 CITY 32 NAM 33 STR 4.4 CITY 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 TITL 6.3 STR 6.4 CITY 6.4 CITY 6.5 TITL 6.5 NAM	gent supreture  E E E E E E E E E E E E E E E E E E	p required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 12  Addition  Addition	000000
Office of ready of the agent. I as signature  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	of Forman, Such change was a attentions of, Section 607.0505, Fic and sole if applicable. (NO) IND DIRECTORS  DELETE  DELETE	FROGERITOR A  13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 21 TITL 22 NAM 2.3 STR 3.2 TITL 32 NAM 3.3 STR 4.4 CITY 5.1 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR	gent supreture  E  E  E  E  E  E  E  E  E  E  E  E  E	p required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 12  Addition  Addition	100.257 760.000
Office of realization of the alignet. I alignet. I alignet. I alignet alignet approximately a street adoress city. St. Zip title name street adoress city. St. Zip	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	an in Forman Section Grange was a attended, Section 607.0505, Fice and side if applicable. (NOT DIRECTORS DELETE DELETE DELETE	FROMING STATUM  13. 1.1 TITL  12 NAM  13 STR  1.4 CITY  21 TITL  22 NAM  2.3 STR  2.4 CITY  3.1 TITL  3.2 NAM  4.3 STR  4.4 CITY  5.1 TITL  5.2 NAM  4.3 STR  5.3 STR  5.4 CITY  5.3 STR  5.4 CITY  5.4 CITY  5.4 CITY  5.5 CITY  5.5 CITY  5.6 CITY  5.7 CITY  5.7 CITY  5.7 CITY  5.7 CITY  5.8 CITY  5.8 CITY  5.8 CITY  5.9 CITY	gent signature  E E E EET ADDRESS /-ST-ZIP E E E EET ADDRESS /-ST-ZIP E E E EET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	p required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 12  Addition  Addition	10000000
Office of realigned of the algorithms of the street. Name  STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	of Forman, Such change was a attentions of, Section 607.0505, Fic and sole if applicable. (NO) IND DIRECTORS  DELETE  DELETE	FROGENITION OF THE PROPERTY OF	gent supreture  E E E E E E E E E E E E E E E E E E	p required wh	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 12  Addition  Addition	, and the position of the posi
Office of realigned. I all signature 12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	an in Forman Section Grange was a attended, Section 607.0505, Fice and side if applicable. (NOT DIRECTORS DELETE DELETE DELETE	FROGENING A  13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 21 TITL 22 NAM 23 STR 2.4 CITY 31 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 6.3 STR 5.4 CITY 6.1 TITL 5.4 CITY 6.1 TITL 6.2 NAM 6.3 STR 6.2 NAM 6.3 STR 6.3 STR 6.4 CITY 6.4 CITY 6.5 NAM 6.5 NA	gent supreture  E E E EET ADDRESS -ST-ZIP E E E EET ADDRESS -ST-ZIP E E E EET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	or required with	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 12  Addition  Addition	
Office of realization of the algert. I all signature file.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE	PO INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 VPD INGRAM, BILL J 960 BERKLEY ROAD AUBURNDALE FL 33823 STD INGRAM, CAROL 960 BERKLEY ROAD	an in Forman Section Grange was a attended, Section 607.0505, Fice and side if applicable. (NOT DIRECTORS DELETE DELETE DELETE	FROGENING A  13. 1.1 TITL 12 NAM 13 STR 1.4 CITY 21 TITL 22 NAM 23 STR 2.4 CITY 31 TITL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 6.3 STR 5.4 CITY 6.1 TITL 5.4 CITY 6.1 TITL 6.2 NAM 6.3 STR 6.2 NAM 6.3 STR 6.3 STR 6.4 CITY 6.4 CITY 6.5 NAM 6.5 NA	gent supressor  E E E E E E E E E E E E E E E E E E	or required with	on reinstading)	purpose of a pt the appoin	D DIRECT	FORS IN 12  Addition  Addition	SOUTH TOURS

14. I hereby certify that the information supplied with this filling 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; 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, with all other like empowered.

SIGNATURE:

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90065 006 \*\*\*150.00