

**DOCUMENT # P99000047482**  
1. Entity Name  
**AUTHORIZED SERVICE CORPORATION OF AMERICA**

Principal Place of Business	Mailing Address
6324 S.R. 579 TAMPA FL 33623	POST OFFICE BOX 24567 TAMPA FL 33623-4567

6. Name and Address of Current Registered Agent	
CAREY, MICHAEL R 712 SOUTH OREGON AVENUE TAMPA FL 33606	Name
	Street Address (
	City

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)

11 OFFICERS AND DIRECTORS 12

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607 of the Securities Exchange Act of 1934, and that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the effect of a declaration under oath, and that I am a duly authorized officer or agent of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 of the Securities Exchange Act of 1934, and that the information has not been changed, or on an attachment with an address, with all other like empowered.

[illegible]

4. FEI Number <b>59-3578620</b>	Applied For
	Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

<b>7. Name and Address of New Registered Agent</b>	
P.O. Box Number is Not Acceptable)	
<b>FL</b>	Zip Code

\_\_\_\_\_  
(when reinstating) DATE

e	<b>10. Election Campaign Financing Trust Fund Contribution.</b>	<input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input checked="" type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<input type="checkbox"/> Change	<input type="checkbox"/> Addition

CR2E034 (9/99)

**SIGNATURE:** SIGNATURE REGISTERED JOHN STANTON 4/25/00 813/310-4898  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #