

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 25, 2000 08:00 AM**
Secretary of State**DOCUMENT # S00844**

1. Entity Name

CREDIT MANAGEMENT ACCEPTANCE CORPORATION

Principal Place of Business

2085 GULF-T0-BAY BLVD**CLEARWATER****34625****US****FL**

Mailing Address

110 S.E. SIXTH ST**20TH FLOOR****FT LAUDERDALE****33301****US****FL**

2. Principal Place of Business

110 SE SIXTH STREET

Suite, Apt. #, etc.

20TH FLOOR

3. Mailing Address

110 SE SIXTH STREET

Suite, Apt. #, etc.

20TH FLOORCity & State
FT LAUDERDALE**FL**City & State
FT LAUDERDALE**FL**Zip
33301Country
USZip
33301Country
US

4. FEI Number

59-3052102

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**CT CORPORATION SYSTEM**
1200 SOUTH PINE ISLAND ROAD**PLANTATION****33324****US****FL****7. Name and Address of New Registered Agent**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/25/2000

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
HYLE KATHLEEN
110 SE 6TH ST
FT LAUDERDALE FL 33301☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HAWKIN THOMAS W
110 S.E. SIXTH ST
FT LAUDERDALE FL 33301☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVS
COLE JAMES O
110 S.E. SIXTH ST
FT LAUDERDALE FL 33301☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WILKERSON, SCOTT A.
128 BUENA VISTA DR
DUNEDIN FL☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
BOURHIS MARC L
110 SE SIXTH STREET
FT LAUDERDALE FL 33301☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
SALHANY RONALD
110 SE SIXTH STREET
FT LAUDERDALE FL 33301☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVS
FERRANDO JONATHAN P
110 SE SIXTH STREET
FT LAUDERDALE FL 33301☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MAROONE MICHAEL E
110 SE SIXTH STREET
FT LAUDERDALE FL 33301☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: JONATHAN P. FERRANDO

04/25/2000