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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S28040

MARION PAWN & GUN, INC.

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90106 049 ***158.75



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Zip Country Zip Zip	´ ´	e	<u> </u>	16						•	· 1
28		Country			Country				current year		
9. Name and Address of Current Registered Agent HALL, WALLACE S 1415 NE 25TH AVE OCALA FL 32670-4860 11. Pursuant to the provisions of Sections 607 0502 and 807 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing is 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, and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. It is above-named corporation submits this statement for the purpose of changing is registered agent, and familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, hope or present rame of impassed agent and tills' speciation. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Intit. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME 12. NAME HALL, WALLACE S. SIRECE ADDRESS CITY, 51-2P OCALA FL 32670-4860 14. OTY, 51-2P TITLE OCALA FL 32670-4860 DELETE 11. TITLE OCALA FL 32670-4860 DELETE 12. TS Reflect a Town 1-ey Change ACTY, 51-2P Change ACTY, 51-2P TITLE OCALA FL 32670-4860 DELETE 14. TITLE OCALA FL 32670-4860 OCALA FL 32670-4860 DELETE 14. TITLE OCALA FL 32670-4860 OCALA FL	_ `			20	¬ ´				cuitent year	Yes	□No
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1415 NE 25TH AVE OCALA FL 32670-4860 14. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, Type of printed name of neutron neu	на і	WALLACE S									
OCALA FL 32670-4860 84 City FL 85 Zip Code	•				82	Street	Address	(P.O. Box Number is Not Ac	ceptable)		
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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 807. 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:

Wallace S. Hall

Daytime Phone #