

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **F93000003971 (9)**

1. Corporation Name

**GENERAL ACCEPTANCE CORPORATION**



Principal Place of Business

Mailing Address

5015 W. SR 46  
BLOOMINGTON IN 47401

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BLOOMINGTON IN 47401

3. Date Incorporated or Qualified

08/25/1993

3a. Date of Last Report

08/24/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

35-1739977

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**

6. Election Campaign Financing

**\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

11. 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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
P	ALGOOD, M.L.	3810 EAST ST	BLOOMINGTON IN 47404	<input type="checkbox"/>
VP	ALGOOD, R. E.	2800 S. OLCOTT BLVD	BLOOMINGTON IN 47401	<input type="checkbox"/>
T	RITTS, W. H III	3910 STONE GATE DR	BLOOMINGTON IN 47401	<input checked="" type="checkbox"/>
D	DICK, ROLLIN M	9085 E. ST RD 334	ZIONSVILLE IN 46077	<input type="checkbox"/>
S	COREY, R. I	3216 BRADSHIRE CT	BLOOMINGTON IN 47401	<input type="checkbox"/>
D	FOUNTAIN, JOHN A	600 CRESS CREEK TERRACE	CRYSTAL LAKE IL 60014	<input checked="" type="checkbox"/>

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
VP	MICHAEL CALL	10781 N. 101 PLACE	SCOTTSDALE AZ 85260	<input checked="" type="checkbox"/>
VP	B. W. GARLAND	4893 PARKGATE DR	BLOOMINGTON IN 47408	<input checked="" type="checkbox"/>
CFO	MARTIN BOSCHER	2800 S. OLCOTT	BLOOMINGTON IN 47401	<input checked="" type="checkbox"/>
VP	S. E. THOMPSON	4400 TANGLEWOOD	BLOOMINGTON IN 47401	<input checked="" type="checkbox"/>
E. L. HENDERSON - DIRECTOR		6225 SUNSET LAKE	W.D.P.L. IN 46260	<input checked="" type="checkbox"/>
				<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Richard Long* CORP SEC

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/1/96

Date

812-876-7400

Daytime Phone #

CR2E034 (12/95)