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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

P94000057169 (2)

CLASSCREDIT, INC.

FILED Feb 24 1997 8:00am Secretary of State



Principal Place of Business 6420 SOUTHPOINT PARKWAY JACKSONVILLE FL 32216		Mailing Address 6420 SOUTHPOINT PARKWAY JACKSONVILLE FL 32216-0944		i saanosi sie isin onsk bûlst âgili afili âfili afili (1861 ists âfilië isk iba)			
					3. Date Incorporated or Qualified 08/02/1994	3a. Date of (
·	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			NOT APPLICABLE		Not Applicable
Suite, Apt	#, &tc.	Suite, Apt #, etc.			5. Certificate of Status Desired	1 1 7 7	3.75 Additional Fee Required
City & State	!	City & State		,. -	6. Election Campaign Financing		5.00 May Be
23		28			Trust Fund Contribution		Added to Fees
Zιρ	Country	Zφ	Country	/	8. This corporation has liability for i	ntangible tax u	nder s. 199.032,
24	25	29	30		Florida Statutes	Yes 🛂 No	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Re	gistered Agent	t e
	NRY, BARRY		81	Name			
	20 SOUTHPOINT PARKWAY		82	Street Add	dress (P.O. Box Number is Not Acceptab	le)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
JAC	CKSONVILLE FL 32216						
			83				
			84	City		85	Zip Code
					rporation submits this statement for the p	FL *°	
SIGNATURE							
SIGNATURE	Signation appeal or product more of regist, and a OFFICERS AI	gent and the if applicable (NO ND DIRECTORS	TE Registered Ag	ent signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRE	ECTORS IN 12
	OFFICERS AF			ent signature requ		ERS AND DIRE	ECTORS IN 12
12.	OFFICERS AT D Graham, David G	ND DIRECTORS	13.	ent signature requ		ERS AND DIRE	
12.	OFFICERS AT D GRAHAM, DAVID G 6420 SOUTHPOINT PARKW	ND DIRECTORS	13. 1.1 DILE 1.2 NAME	ent signature requi		ERS AND DIRE	
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Tall an officer or director of the corpodition 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 chapter or or an attachment with a statutes.

IGNING OFFICER OR DIRECTOR

SIGNATURE:

904-281-7488