2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State
05-16-2001 90253 045 ***150.00

DOCUMENT # F00000003922

1. Entity Name

Nationwide Recovery Service, Inc.

Principal Place of Business	Mailing Address
7001 Peachtree Ind. Blvd., Ste. 330 Norcross, GA 30092	P.O. Box 947 Waukesha, WI 53187-0947

A00068506

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7001 Peachtree Ind. Blvd.	P.O. Box 947
Suite, Apt. #, etc.: Ste. 330	Suite, Apt. #, etc.:
City & State: Norcross, GA	City & State: Waukesha, WI
Zip: 30092 Country: USA	Zip: 53187-0947 Country: USA

4. FEI Number: 58-2437976 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
	Name: Franki Moore
	Street Address (P.O. Box Number is Not Acceptable): 7067 W. Broward Blvd, Suite C
	City: Plantation FL Zip Code: 33317

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: Franki Moore Franki Moore 4/26/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO/President Gregory Shelton 1825 Barrett Lakes Blvd, Ste. 250 Kennesaw, GA 30144	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~CEO/President~~ Thomas Oliver 1825 Barrett Lakes Blvd., Ste. 250 Kennesaw, GA 30144	☐ Change ☒ ~~Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO/Secretary James Whalen 1825 Barrett Lakes Blvd, Ste. 250 Kennesaw, GA 30144	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO/Secretary Scott J. Tsatos 1825 Barrett Lakes Blvd, Ste. 250 Kennesaw, GA 30144	☐ Change ☒ ~~Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice President Daniel A. Schulte 401-A Pilot Ct. Waukesha, WI 53188	☐ Change ☒ ~~Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (11/00)

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.

X123

SIGNATURE: Daniel A Schulte DANIEL A. SCHULTE 28 MAR 2001 8007599121
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #