2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2005 08:00 AM
Secretary of State

DOCUMENT # F01000001812

1. Entity Name
FEDERAL BOND & COLLECTION SERVICE, INC.

Principal Place of Business	Mailing Address
841 E. HUNTING PARK AVENUE PHILADELPHIA, PA 19124	841 E. HUNTING PARK AVENUE PHILADELPHIA, PA 19124

01112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
23-2421430
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2005 Fee will be $550.00

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

U00000187360
01/24/05-80037-002 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	NEARY, JAMES
STREET ADDRESS	1410 TURKEY TROT ROAD
CITY-ST-ZIP	WARWICK, PA 18974
TITLE	V
NAME	NEARY, JOSEPH JR.
STREET ADDRESS	139 YORTOWN QD.
CITY-ST-ZIP	WOOLWICH, NJ 08085
TITLE	S
NAME	NEARY, JOANNE
STREET ADDRESS	172 HILLTOP DR.
CITY-ST-ZIP	CHURCHVILLE, PA 18966
TITLE	CEO
NAME	NEARY, JOSEPH SR.
STREET ADDRESS	172 HILLTOP DR.
CITY-ST-ZIP	CHURCHVILLE, PA 18966
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joanne Neary - JOANNE NEARY 1/13/05 215-355-8711
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #