2002 UNIFORM BUSINESS REPORT (UBR)

May 07, 2002 8:00 am Secretary of State F98000004823 DOCUMENT # 1. Entity Name 05-07-2002 90222 033 ***150 00 CREDIT BUREAU COLLECTION SERVICES, INC. Principal Place of Business Mailing Address 250 EAST TOWN STREET 250 EAST TOWN STREET COLUMBUS OH 43215 COLUMBUS OH 43215 2. Principal Place of Business 3. Mailing Address 236 EAST TOWN ST 236 EAST TOWN ST. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State 4. FEI Number City & State Applied For 31-1519935 Columbus Ohio Ohio DIMBUS Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 43215 43215 FRANKLIN **HRANKLIN** Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301 Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. \Box Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME EBERT, LARRY NAME STREET ADDRESS 250 EAST TOWN STREET STREET ADDRESS CITY-ST-ZIP COLUMBUS OH 43215 CITY-ST-ZIP TITLE ☐ Delete Change TITLE ☐ Addition NAME STRIKER, BRIAN NAME . BRIAN P. STRIKER STREET ADDRESS 250 EAST TOWN STREET STREET ADDRESS 236 EAST TOWN ST. CITY-ST-7IP COLUMBUS OH 43215 CITY-ST-ZIP COLUMBUS, OHIO 43215 TITLE ☐ Delete TITLE TS ☐ Change ☐ Addition NAME CANTRELL, DIRK M STREET ADDRESS 250 EAST TOWN STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COLUMBUS OH 43215 TITLE ☐ Delete TITI F Change ☐ Addition NAME PRICE, WILLIAM H NAME STREET ADDRESS **250 EAST TOWN STREET** STREET ADDRESS COLUMBUS OH 43215 CITY-ST-ZIP CITY-ST-7(P TITLE TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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