

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
 AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 09, 1999 8:00 am
Secretary of State

07-09-1999 90021 009 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000027744
 Corporation Name
FLORIDA CREDIT & COLLECTIONS BUREAU, INC.



Principal Place of Business
 24 E. GARDEN STREET
 STE. 7
 PENSACOLA FL 32501
 S

Mailing Address
 24 E. GARDEN STREET
 STE. 7
 PENSACOLA FL 32501
 US

DO NOT WRITE IN THIS SPACE

Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

2a. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Date Incorporated or Qualified
 03/29/1996

4. FEI Number
 59-3366489 Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property. Yes No

9. Name and Address of Current Registered Agent
LOWELL, ROBERT W.
224 EAST GARDEN STREET
STE. 7
PLANTATION FL 32501

10. Name and Address of New Registered Agent

81 Name

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

83

84 City **FL** 85 Zip Code

I, 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

OFFICERS AND DIRECTORS

LE DELETE
 ME **D**
 REET ADDRESS **ARMSTRONG, RONALD J**
1 MULBERRY STREET
EAST ELLIJAY GA 30539

LE DELETE
 ME **P**
 REET ADDRESS **LOWELL, ROBERT W.**
224 E. GARDEN ST., STE. 7
PENSACOLA FL

LE DELETE
 ME **S**
 REET ADDRESS **LOWELL, JOANN**
224 E. GARDEN ST., STE. 7
PENSACOLA FL

LE DELETE

LE DELETE

LE DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 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: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

U112589

CR2E034 (5/99)

585533-40021-9
P96000027744

FLORIDA CREDIT & COLLECTIONS BUREAU, INC.

Licensed & Certified Credit & Collections Specialist
Member of Equifax, T.R.W., & Trans Union
Member of American Collectors Association
Member of Healthcare Financial Management Association

July 2, 1999

Division of Corporation
Annual Reports Filings
PO Box 1500
Tallahassee, FL 32302-1500

Dear To Whom it May Concer,

In response to receiving your 1999 Profit Corporation Annual Report Packet in the mail, which states that it is your 2ND NOTICE, I am stating that this is the first I have received such a notice of any sort in the mail this year. After inquiry from my accountant, to my knowledge, the original filing fee was \$150.00. Please find the enclosed check in the amount of \$150.00.

If you have any questions concerning this dispute, please contact me at (888) 888-8718. Thank you for your help in this matter.

Sincerely,



Robert W. Lowell
President and CEO

enclosed



AMERICAN COLLECTORS
association member

"Covering the Southeast with professional collection service"

1480 Terrell Mill Road, Suite 739-F
Marietta, Georgia 30067
(770) 955-7830

Carlton Palms Office Complex
224 East Garden Street, Suite 7
Pensacola, Florida 32501
(904) 438-8718 Toll Free: 1-888-888-8718
Fax: (904) 438-4428

5307 Ford Mtn. Road
Blairsville, Georgia 30512
(706) 745-8029 1-800-933-3360
Fax: (706) 745-1231