

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000027744

**FILED**  
**May 05, 2015**  
**Secretary of State**  
**CC8767700624**

**Entity Name:** SOUTHERN STATES CREDIT & COLLECTIONS BUREAU, INC.

**Current Principal Place of Business:**

224 E. GARDEN STREET  
STE. 325  
PENSACOLA, FL 32502

**Current Mailing Address:**

224 E. GARDEN STREET  
STE. 325  
PENSACOLA, FL 32502 US

**FEI Number: 59-3366489**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WOODWARD, DAVID L. ESQ.  
1415 LEMHURST ROAD  
PENSACOLA, FL 32507 US

*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:** DAVID L. WOODWARD

05/05/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            LOWELL, ROBERT W  
Address        224 E GARDEN ST, STE 325  
City-State-Zip: PENSACOLA FL 32502

Title            VP  
Name            LOWELL, ROBERT W  
Address        224 E. GARDEN ST, STE. 325  
City-State-Zip: PENSACOLA FL 32502

Title            S  
Name            LOWELL, ROBERT W  
Address        224 E. GARDEN ST, STE. 325  
City-State-Zip: PENSACOLA FL 32502

Title            T  
Name            LOWELL, ROBERT W  
Address        224 E. GARDEN ST, STE 325  
City-State-Zip: PENSACOLA FL 32502

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT LOWELL

**PRESIDENT**

05/05/2015

Electronic Signature of Signing Officer/Director Detail

Date