2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 340748

FILED Jun 08, 2005 Secretary of State

Entity Name: COLLECTION BUREAU OF FT. WALTON BEACH, INC.

Current Principal Place of Business:		New Principal Place of Business:		
PO BOX 4		KWAY , FL 325494127 US		
Current M	lailing Addres	s:	New Mailing Addre	ss:
PO BOX 4 FORT WA		, FL 325494127 US		
FEI Number	: 59-1229511	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:
712 MOÓF	TOMMY M RE CIR CITY, FL 3240	1 US		
The above		submits this statement for the p	ourpose of changing its register	red office or registered agent, or both,
in the State	e of Florida.			
in the State	RE:	nic Signature of Registered Age	ent	Date
in the State SIGNATUI In accordan	RE: Electror	3(2)(b), F.S., the corporation did no		Date
in the State SIGNATUI In accordan Election Car	RE: Electror	3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	ot receive the prior notice.	Date GES TO OFFICERS AND DIRECTORS
in the State SIGNATUI In accordan Election Car	Electron Electron Ice with s. 607.19 Impaign Financing S AND DIREC	3(2)(b), F.S., the corporation did no g Trust Fund Contribution (). TORS: Delete TOMMY,	ot receive the prior notice.	
in the State SIGNATUI In accordan Election Car OFFICER Title: Name: Address:	Electron Ce with s. 607.19 The property of t	3(2)(b), F.S., the corporation did no grust Fund Contribution (). TORS: Delete OMMY, PASS BEACH, FL Delete A, RCLE	ADDITIONS/CHANG Title: Name: Address:	GES TO OFFICERS AND DIRECTORS
in the State SIGNATUI In accordan Election Can OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	Electron Coe with s. 607.19 Fanancing Coe with s. 607.19 Fanancing Coe with s. 607.19 Coe with s. 60	3(2)(b), F.S., the corporation did not a Trust Fund Contribution (). TORS: Delete OMMY, ASS BEACH, FL Delete A, RCLE FL, Delete IA, RCLE RCLE	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	GES TO OFFICERS AND DIRECTORS () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: TOMMY COOLEY JR PD 06/08/2005