2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# F00000005496

Entity Name: TELCOLLECT, INC.

Current Principal Place of Business:

3100 MEDLOCK BRIDGE RD
SUITE 140
NORCROSS, GA 30071

New Principal Place of Business:

Current Mailing Address:

3100 MEDLOCK BRIDGE RD
SUITE 140
NORCROSS, GA 30071

New Mailing Address:

FEI Number: 58-2522740 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED CORPORATE SERVICES, INC.
9200 SOUTH DADELAND BLVD,. STE 508
MIAMI, FL 33156 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete
Name: DOHERTY, JOSEPH
Address: 3100 MEDLOCK BRIDGE ROAD, SUITE 140
City-St-Zip: NORCROSS, GA 30071

Title: D ( ) Delete
Name: REINHOLD, HENRY
Address: 59 MAIDEN LANE
City-St-Zip: NEW YORK, NY

Title: S ( ) Delete
Name: SHANKAR, JAY
Address: 3100 MEDLOCK BRIDGE RD #140
City-St-Zip: NORCROSS, GA 30071

Title: CFOD ( ) Delete
Name: SPIER, TINA
Address: 3100 MEDLOCK BRIDGR ROAD, SUITE 140
City-St-Zip: NORCROSS, GA 30071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TINA SPIER CFO 03/05/2009

Electronic Signature of Signing Officer or Director — Date