


FILED
Feb 15, 2005 08:00 AM
Secretary of State

DOCUMENT # F04000003672 1. Entity Name UNITED COMMERCIAL COLLECTIONS, INC.			
Principal Place of Business 105 EARTHART DRIVE, SUITE 105 104 WILLIAMSVILLE, NY 14221		Mailing Address 105 EARTHART DRIVE, SUITE 105 104 WILLIAMSVILLE, NY 14221	
DO NOT WRITE IN THIS SPACE			
		01262005 No Chg-P CR2E034 (10/03)	
		4. FEI Number 16-1637369	
		Applied For <input type="checkbox"/> Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			
STERN, ALAN 20605 PRESTON LANE TAMPA, FL 33558		DO NOT WRITE IN THIS SPACE	
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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		PD BURGIO, VINCE 55 SWEETWOOD DRIVE AMHERST, NY 14228	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		VD MAIN, ERIC 13865 CENTERLINE ROAD STRYKERSVILLE, NY 14145	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		STD LUKSCH, MICHAEL 218 SETON ROAD CHEEKTOWAGA, NY 14225	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: Vincent J. Burgio		2-8-2005 716-250-4600	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	