

218 EAST NEW YORK AVENUE DELAND, FLORIDA 32724 (386) 734-8081 FAX (386) 822-4669 ON MAR 19 MAR 18 MAR TON

March 15, 2001

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

300<u>00387760</u>3-+2 -03/19/01--01115--023 ******35.00 ******35.00

Re: Universal Collection Services, Inc. Change of Registered Agent/Office

Dear Sir/Madam:

Enclosed for filing please find original executed Statement of Change of Registered Office or Registered Agent or Both for Corporations for Universal Collection Services, Inc., along with our firm check in the amount of \$35.00.

ry Truly Yours,

Glenn L.

GLN/crt

Enclosures

RA Chg.

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.050 corporation organized under the			tutes,
submits the follo	wing statement in order to cha			th, in
the State of Flor 1. The name of t	naa. he corporation: <u>Universa</u>	1 Collection S	Services, Inc.	
2. The mailing a	ddress of the corporation:		y York Ave.	
2 Dete of the same	poration/qualification: 9/2			
	l address of the current registers		ment number. 10220	
4. The name and	address of the current registere	sa agent and office.		0/2
_	Roberta A. Kolle	r		198
_	756 E. Lincoln R	d		MASION S
5. The name and	DeLand, FL = 3272 address of the new registered (P. O. Bo		or registered office (if change	ed):
	Glenn L. Nye, Es	g•		-
_	218 E. New York	Ave.		
	DeLand, FL 3272	4		
	ess of its registered office and ted, will be identical.			
authorized by the	is authorized by resolution dul- tile board. One of an officer, chairman or vice chairman		of directors or by an officer 3/4/01 (Date)	so
John .	A. Doss; President (Printed or typed name and title)			
Having been na corporation, I h I further agree to performange of registered agen	med as registered agent and to ereby accept the appointment to comply with the provisions only duties, and I am familiar wit.	o accept service of pro as registered agent an of all statutes relative with and accept the obj	ocess for the above stated ad agree to act in this capaci to the proper and complete ligation of my position as	ty.
-/	ignature of Registered Agent)		(Date)	
If signing on behal	f of an entity:			-
Glenn	L. Nye Typed or Printed Name)		(Capacity)	71
	···			

* * * FILING FEE: \$35.00 * * *