FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name F9600002000 (5)

NEW ORLEANS NATIONAL COLLECTION SERVICE, INC.

Principal Place of Business	Maifing Address
3850 N. CAUSEWAY BLVD. SUITE 560 METAIRIE LA 70002-1752	PO BOX 6991 METAIRIE LA 70009-6991
2. Principal Place of Business	2a. Mailing Address
2. Principal Place of Business Suite, Apt. #. etc.	2e. Mailing Address 26 Suite, Apt. #, etc.

FILED May 15 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/22/1996 4. FEI Number Applied For 72-0272870 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes ☐ No 29 30 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Namo ODOM, F P 305 SOUTH GADSDEN STREET Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or rogistered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registerest agent and (the diapplicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. ___ Addition DELETE Change TITLE 1.1 TITLE **NULL, LESTER H JR** NAME 1.2 NAME 4505 TRACEY STREET STREET ADDRESS 1.3 STREET ADDRESS MERAUX LA 70075 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.11016 SALASSI, ROBERT T JR NAME 2.2 NAME 2422 BROADWAY STREET ADDRESS 2.3 STREET ADDRESS **NEW ORLEANS LA 70125** 2.4 CITY-ST-ZiP CITY-ST-ZIP ☐ DELETE Change Addition 3.1 TITLE NAME HARTEL. STEPHEN C JR 3.2 NAME 4101 VENDOME PLACE STREET ADDRESS 3.3 STREET ADDRESS **NEW ORLEANS LA 70125** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CHY-ST-ZIP DELETE Addition TITLE 5.1 T01.6 NAME 5.2 NAME STREET ADDRESS 53 STHEFT ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE Change TITLE 61 TIBLE NAME 62 NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.