FILED

2002 UNIFORM BUSINESS REPORT (UBR)

Jan 27, 2002 8:00 am Secretary of State DOCUMENT # F97000002171 1. Entity Name -27-2002 90023 041 ***150.00 NCO FINANCIAL SYSTEMS, INC. Principal Place of Business Mailing Address -55-DODGE-RD-515 PENNSYLVANIA AVE FT WASHINGTON PA 19034 **GETZVILLE NY 14068** 2. Principal Place of Business 3. Mailing Address 50 CROSSBOINT PARKWAY Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE ORPORATE City & State City & State 4. FEI Number Applied For 23-1670927 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City FL 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change ☐ Addition PCD ☐ Delete TITLE TITLE BARRIST, MICHAEL J NAME NAME STREET ADDRESS STREET ADDRESS 515 PENNSYLVANIA AVE CITY-ST-ZIP CITY-ST-ZIP FT WASHINGTON PA 19034 ☐ Addition □ Delete TITLE ☐ Change NAME NAME PIOLA, CHARLES C JR STREET ADDRESS STREET ADDRESS 515 PENNSYLVANIA AVE CITY-ST-ZIP CITY-ST-ZIP FT WASHINGTON PA 19034 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME GINDIN, JOSHUA STREET ADDRESS STREET ADDRESS 515 PENNSYLVANIA AVE CITY-ST-ZIP CITY-ST-78 FT WASHINGTON PA 19034 ☐ Delete TITLE ☐ Change ☐ Addition TITLE SV NAME NAME NOAH, MICHAEL G STREET ADDRESS STREET ADDRESS 55 DODGE RD CITY-ST-ZIP CITY-ST-7IP **GETZVILLE NY 14068** Change ☐ Addition TITLE ☐ Delete TITLE NAME WINOKUR, STEVEN L NAME STREET ADDRESS STREET ADDRESS 515 PENNSYLVANIA AVE CITY-ST-ZIP CITY-ST-7IP FT WASHINGTON PA 19034 TITLE **D**elete TITLE Change ☐ Addition NAME MCGOWAN, JOSEPH C NAME 515 PENNSYLVANIA AVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP FT WASHINGTON PA 19034

13. I hereby certify that the information supplied with this filling 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 of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an accurate and the empowered.

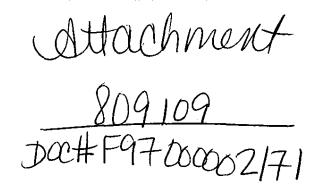
SIGNATURE:

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SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

//11/02 800/227-4000



Getzville, NY 14068 (800) 227-4000 (716) 404-2100 (716) 404-2120 FAX jackie.canavier@ncogroup.com



January 15, 2002

VIA FEDERAL EXPRESS

Department of State Division of Corporations 409 East Gaines Street Tallahassee, FL 32399

Re:

NCO Financial Systems, Inc.

2002 Uniform Business Report

Dear Sir or Madam:

Enclosed please find the 2002 Uniform Business Report for NCO Financial Systems, Inc. along with a check for \$150.00, for the filing fees.

Should you have any questions regarding the enclosed, please do not hesitate to contact me at 800/227-4000, ext. 2147.

Very truly yours,

Jáckie Canavier

Paralegal, Corporate Legal Department

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Enclosures

cc:

Tracey A. Wild, Esq. (w/o encls.)

1: Legal Files HITZEL\ Ilicensi \FL\AnnualReport-ltr.doc