2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004125

Entity Name: COLLECTION BUREAU OF AMERICA, LTD. INC.

FILED Mar 12, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
FIRST FLO	EN LANDING F OOR D, CA 94545	ROAD			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
FIRST FLO	EN LANDING F OOR D, CA 94545	ROAD			
FEI Number	: 94-1478327	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
1200 SOU	PORATION SYS ITH PINE ISLAN ION, FL 33324	ND ROAD			
	e named entity s e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Age	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ().			
OFFICER	S AND DIREC	TORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DE LUNA, SHA	ANDING RD, 1ST FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DE LUNA, MATI	ANDING RD, 1ST FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DE LUNA, SHA	ANDING RD, 1ST FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DELUNA, RICH	ANDING RD, 1ST FLR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DELUNA, MATIL	ANDING RD, 1ST FLR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DELUNA, SHAV	ANDING RD, 1ST FL	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: SHAWN DELUNA PRES 03/12/2009