2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000004821

1. Entity Name BELLSOUTH CREDIT AND COLLECTIONS MANAGEMENT, INC									
Principal Place of Bus	iness	Mailing Address C/O LEIGH ANN DOLAN 675 W PEACHTREE STREET. N.E., STE. 4300 ATLANTA GA 30375							
C/O LEIGH ANN DOLAN 675 W PEACHTREE STRI ATLANTA GA 30375									
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.							
		City & State							
Zip	Country	Zip	Country						

FILED May 02, 2001 8:00 am Secretary of State

05-02-2001 90021 020 ***150.00

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2. Principal Place of Business		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRI	TE IN THIS S	PACE			
City & State		City & State		4.	El Number 58-2491049	9	├	oplied For		
Zip	Country	Zip	Country	5. (Certificate of Status Desired		\$8.75 Add	ditional		
6. Name and Address of Current Registered Agent			<u> </u>	7. 1	lame and Address of New F	Registered A	gent			
				Name						
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301-2525				Street Address (P.O. Box Number is Not Acceptable)						
			City	<u></u>		FL	Zip Cod	e		
8. The above	e named entity submits this statement for the named entity submits this statement for the name of registered agent and		registered office of			orida.				
EII E NOWIN EE			!! FEE IS \$150.							
1			01 Fee will be \$5		 Election Campaign Fir Trust Fund Contribution 			May Be		
(See criteria on back) Make Check Payab				i rust fund Contributio	on. L	Added	to Fees			
11.	. OFFICERS AND DIRECTORS				DITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR!	S IN 11		
TITLE	AS □ Celete ▼		TITLE	CEO/P			☐ Change	X Addition		
NAME	DOLAN, LEIGH A			Arthur T. Smith						
STREET ADDRESS	0.0 11. 1 2.011.11.22 011, 111.23		STREET ADDRESS	15555 CO10111144C 111111						
CITY-ST-ZIP	ATLANTA GA 30375	 _	CITY-ST-ZIP	<u>Birmin</u>	gham, AL 352	243				
TITLE	V ISLAN	j Delete	TITLE	•			Change	Addition \		
NAME	PYRON, JOHN		NAME.							
STREET ADDRESS	675 W. PEACHTREE ST., N.E.		STREET ADDRESS CITY-ST-ZIP			-				
CITY-ST-ZIP	ATLANTA GA 30375		- -							
TITLE	V CHARLES	☐ Delete	TITLE				☐ Change	~ ↑ Addition		
NAME STREET ADDRESS	HUNNICUTT, CHARLES 1057 LENOX PARK BLVD.		NAME STREET ADDRESS					}		
. CITY-ST-ZIP	ATLANTA GA 30319		CITY-ST-ZIP							
	V GA 30319					·	☐ Change	Addition		
TITLE NAME	MORTON, CLAUDE P	☐ Delete	TITLE NAME	İ						
STREET ADDRESS	3535 COLONNADE PARKWAY, ROC	OM Self	STREET ADDRESS							
CITY-ST-ZIP	BIRMINGHAM AL 35243	JIN 3011	CITY-ST-ZIP	1				, }		
TITLE	VS	Delete	TITLE	VP, Se	c. & Gen Cour	sel	Change	Addition		
NAME	LIGHTSEY, HARRY	~~~	NAME		Gilbert		- •	_		
STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·		STREET ADDRESS		st Peachtree	St.,	#4300			
CITY-ST-ZIP	ATLANTA GA 30375_		CITY-ST-ZIP		a, GA 30375			i		
TITLE	T	☐ Delete	TITLE				☐ Change	Addition		
NAME	PITTMAN, JAMES L		NAME							
STREET ADDRESS	1155 PEACHTREE STREET		STREET ADDRESS					{		
CITY-ST-ZIP	ATLANTA GA 30309		CITY-ST-ZIP							

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Leigh
TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR