

**2001 UNIFORM BUSINESS REPORT (UBR)****FILED****Jan 23, 2001 08:00 AM**  
**Secretary of State****DOCUMENT # F99000006730**1. Entity Name  
ANC COLLECTOR CORPORATION

## Principal Place of Business

200 SOUTH ANDREWS AVENUE

FORT LAUDERDALE  
33301

FL

## Mailing Address

200 SOUTH ANDREWS AVENUE

FORT LAUDERDALE  
33301

FL

## 2. Principal Place of Business

200 SOUTH ANDREWS AVENUE, 11TH FLOOR

## 3. Mailing Address

200 SOUTH ANDREWS AVENUE, 11TH FLOOR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

## City &amp; State

FORT LAUDERDALE

FL

## City &amp; State

FORT LAUDERDALE

FL

Zip  
33301

Country

Zip  
33301

Country

## 4. FEI Number

52-2207164

Applied For

Not Applicable

## 5. Certificate of Status Desired

☐**\$8.75** Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROADPLANTATION  
33324

US

FL

## 7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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)

01/23/2001

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back)☒**FILE NOW!!! FEE IS \$150.00****After MAY 1, 2001 Fee will be \$550.00****Make Check Payable to Department of State**10. Election Campaign Financing  
Trust Fund Contribution.☐**\$5.00** May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KATHLEEN W 200 SOUTH ANDREWS AVENUE FORT LAUDERDALE FL 33301	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT WILSON LELAND F 200 SOUTH ANDREWS AVENUE FORT LAUDERDALE FL 33301	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS SCHWARTZ HOWARD 200 SOUTH ANDREWS AVENUE FORT LAUDERDALE FL 33301	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DAS STEWART GORDON W 1201 MARKET ST., STE. 1700 CHASE MANHATTAN WILMINGTON DE 19801	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

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:** Howard D. Schwartz

DS

01/23/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)

**O. MASON HURST, II, DVPAS**  
**200 S. ANDREWS AVENUE**

**FORT LAUDERDALE, FL 33301**