

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 13 AM 10:38

DOCUMENT # G70846

(2)

1. Corporation Name

UNITED TRUST BILLING, INC.

Principal Place of Business

6702-C PLANTATION RD.
PENSACOLA FL 32504

Mailing Address

6702-C PLANTATION RD.
PENSACOLA FL 32504

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/21/1983

3a. Date of Last Report

05/01/1994

4. FEI Number

59-2337034

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 109.032,
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

21 2401 Langley Ave

2a. Mailing Address

26 2401 Langley Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Pensacola FL

City & State

28 Pensacola FL

Zip

24 32504

Country

25 Escambia

Zip

29 32504

Country

30 Escambia

9. Name and Address of Current Registered Agent

KOLLARS, BERT
6300 N. DAVIS HWY.
PENSACOLA FL

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered 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

Bert D. Kollars

Bert D. Kollars - owner

2-8-95

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DST
KOLLARS, BERT
6300 N DAVIS HWY
PENSACOLA, FL 00000

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MONROE, ART
113 LAPALCO BLVD
GRETN LA

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
KOLLARS, CRAIG
7891 CRESTWOOD BLVD.
BIRMINGHAM AL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.02(6)(g), 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 be in the same legal effect as if made under oath in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

Bert D. Kollars

Bert D. Kollars - owner

2-8-95

904 470 4115

(Signature and typed or printed name of signing officer on declaration)