

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR -7 PM 1:40

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # K67718 (2)
1. Corporation Name
ADVANCED COLLECTIONS, INC.

Principal Place of Business
**24 N.W. RACETRACK RD
FT. WALTON BCH FL 32547
US**

Mailing Address
**P O BOX 3026
FT. WALTON BEACH FL 32547
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
02/22/1989

3a. Date of Last Report
01/24/1994

4. FFI Number
59-2944573

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. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business
21

Suite, Apt. #, etc.
22

City & State
23

Zip
24

Country
25

2a. Mailing Address
26

Suite, Apt. #, etc.
27

City & State
28

Zip
29

Country
30

9. Name and Address of Current Registered Agent

**COOPER, CHARLES W.
7 PEBBLE BEACH DR.
SHALIMAR FL 32579**

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

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
P	CARMICHAEL, WILLIAM E.	2435 HWY. 2	BAKER FL
V	COOPER, CHARLES W.	7 PEBBLE BEACH DR.	SHALIMAR FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY - ST - ZIP	Change	Addition
P	COOPER, CHARLES W.	7 PEBBLE BEACH DR.	SHALIMAR, FL 32579	☒	☐
ST	COOPER, ELLEN L.	7 PEBBLE BEACH DR.	SHALIMAR, FL 32579	☐	☒
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 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 12 or Block 13 if changed, or on an attachment with no numbers.

SIGNATURE:

Charles W. Cooper

4/3/95

(904) 863-4704

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number