2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 08, 2008
Secretary of State

DOCUMENT# N48030

Entity Name: COLLECTION CONNECTION OF TAMPA, INC.

Current Principal Place of Business:

2399 E. BUSCH BLVD
TAMPA, FL 33612

New Principal Place of Business:

4998-B E. BUSCH BLVD.
TAMPA, FL 33617

Current Mailing Address:

319 INTERSTATE BOULEVARD
SARASOTA, FL 34240

New Mailing Address:

PO BOX 50128
EUGENE, OR 97405

FEI Number: 59-3108311 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LYMAN, ANDREW
319 INTERSTATE BOULEVARD
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

LYMAN, ANDREW
571 INTERSTATE BOULEVARD
SARASOTA, FL 34240 US

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: _____ 05/08/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DT ( ) Delete
Name: OHARA, DAN
Address: 319 INTERSTATE BOULEVARD
City-St-Zip: SARASOTA, FL 34240

Title: DP ( ) Delete
Name: LYMAN, ANDREW
Address: 319 INTERSTATE BOULEVARD
City-St-Zip: SARASOTA, FL 34240

Title: DS ( ) Delete
Name: GALKO, VIRGINIA
Address: 319 INTERSTATE BOULEVARD
City-St-Zip: SARASOTA, FL 34240

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change ( ) Addition
Name: OHARA, DAN
Address: 571 INTERSTATE BOULEVARD
City-St-Zip: SARASOTA, FL 34240

Title: DP (X) Change ( ) Addition
Name: LYMAN, ANDREW
Address: 571 INTERSTATE BOULEVARD
City-St-Zip: SARASOTA, FL 34240

Title: DS (X) Change ( ) Addition
Name: GALKO, VIRGINIA
Address: 571 INTERSTATE BOULEVARD
City-St-Zip: SARASOTA, FL 34240

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANDREW LYMAN DP 05/08/2008
Electronic Signature of Signing Officer or Director — Date