

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90097 007 ***150.00

DOCUMENT # P01000117215

1. Entity Name
COLLECTION & CREDIT CONNECTION INC.

Principal Place of Business

**474 NE 36TH STREET
 BOCA RATON FL 33431**

Mailing Address

**474 NE 36TH STREET
 BOCA RATON FL 33431**

2. Principal Place of Business

(same)

3. Mailing Address

(same)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

☒ Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name **Laura Mathison**

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

474 NE 36th Street

City **Boca Raton**

FL

Zip Code **33431**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Laura Mathison**

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

(NOTE: Registered Agent signature required when reinstating)

09-9-02

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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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 **D** ☐ Delete
 NAME **MATHISON, LAURA P**
 STREET ADDRESS **474 NE 36TH STREET**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE **D** ☒ Delete
 NAME **LOVE, BRIAN R**
 STREET ADDRESS **474 NE 36TH STREET**
 CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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: **Laura Mathison**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09-09-02 954-255-4684

Date

Daytime Phone #

CR2E034 (4/02)

Attachment

871843

#PD1000117215

Collection & Credit Connection, Inc.

C/o Laura Probst Mathison

474 NE 36th Street

Boca Raton, FL 33431-5922

(561) 347-8525 (home)

(954) 255-4687 (work)

(954) 873-2260 (cell)

(954) 255-4834 (fax at work)

September 9, 2002

To Whom It May Concern:

Our corporation did not receive the original notice asking for a filing of a UBR form and fee. As such we are asking for a waiver of the late fee, and, therefore, submit this form and letter with a check for \$150.00.

We appreciate your consideration as we are a new corporation (actually we haven't even done any business yet) and didn't realize we had to file such a form at all.

Thank you,

Sincerely,



Laura Probst Mathison
Director/President

Enclosures