

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

03 OCT 27 AM 10:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P0200014255

1. Entity Name

Margaret Morgan Collections, Inc.



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2102 Gatchet Court

Suite, Apt. #, etc.

#208

City & State

Orlando, FL

Zip
32807

Country
USA

3. Mailing Address

P.O. Box 5074

Suite, Apt. #, etc.

City & State

Winter Park, FL

Zip
32793

Country
USA

4. FEI Number
03-0495764

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

David Crowder

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

820 Lake Kathryn Circle

City

Casselberry

FL

Zip Code
32707

**DO NOT WRITE
IN THIS SPACE**

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

Signature, type or print name of registered agent and title if applicable

David Crowder

10/21/03

(NOTE: Registered Agent Signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
President	Margaret Dean	2102 Gatchet Ct. #208	Orlando, FL 32807				

500024167045
10/27/03--01062--005 **150.00

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like, empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Margaret Dean

10/21/03

Date

407-679-0007

Daytime Phone #

CR2E034B (12/02)

21 10/30

MARGARET MORGAN COLLECTIONS, INC.
P.O. BOX 5074
WINTER PARK, FL 32793

October 21, 2003

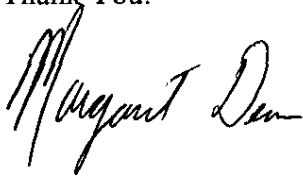
Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Fl. 32302-1500

Dear Sirs:

Please find enclosed my check for \$150.00 for the registration fees for my corporation. I am requesting that you reinstate my company since I have never received any correspondence from your office. Mail has been lost and stolen at my street address and I request that you use my Post Office Box for all correspondence.

Please reinstate my company based on the fact that I never received the information.

Thank You:

A handwritten signature in cursive script, appearing to read "Margaret Dean".

Margaret Dean President