# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 01, 2004**
**Secretary of State**

DOCUMENT# P03000104730

**Entity Name:** MYDEBTCOLLECTOR.COM, INC.

**Current Principal Place of Business:**

475 NORTH VOLUSIA AVENUE
ORANGE CITY, FL 32738

**New Principal Place of Business:**

**Current Mailing Address:**

475 NORTH VOLUSIA AVENUE
ORANGE CITY, FL 32763

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JESSUP, E A
475 NORTH VOLUSIA AVENUE
ORANGE CITY, FL 32763 US

**Name and Address of New Registered Agent:**

JESSUP, JAMISON M SR
475 NORTH VOLUSIA AVENUE
ORANGE CITY, FL 32763 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: JAMISON MARK JESSUP, SR. 05/01/2004
Electronic Signature of Registered Agent Date

**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P,D ( ) Delete
Name: JESSUP, E A
Address: 475 NORTH VOLUSIA AVENUE
City-St-Zip: ORANGE CITY, FL 32763

Title: S,T (X) Delete
Name: JESSUP, E A
Address: 475 NORTH VOLUSIA AVENUE
City-St-Zip: ORANGE CITY, FL 32763

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PDTS (X) Change ( ) Addition
Name: JESSUP, JAMISON M SR
Address: 475 NORTH VOLUSIA AVENUE
City-St-Zip: ORANGE CITY, FL 32763

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMISON MARK JESSUP SR PRES 05/01/2004
Electronic Signature of Signing Officer or Director Date