2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139479

Entity Name: PCPA COLLECTION SERVICES, INC.

FILED Apr 30, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2727 W. MARTIN LUTHER KING, JR. BOULEVARD

SUITE 450

TAMPA, FL 33607 US

Current Mailing Address: New Mailing Address:

 $2727\ \text{W}.\ \text{MARTIN}\ \text{LUTHER}\ \text{KING},\ \text{JR}.\ \text{BOULEVARD}\ \text{SUITE}\ 450$

TAMPA, FL 33607 US

FEI Number: 20-1726889 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HANEY, R. REID 101 E. KENNEDY BLVD. SUITE 3700 TAMPA, FL 33602 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: CASTELLANO, MYRIAM

Address: 2727 W. MARTIN LUTHER KING JR. BLVD., #450

City-St-Zip: TAMPA, FL 33607 US

Title: [

Name: CASTELLANO, NORMAN J M.D.

Address: 2727 W. MARTIN LUTHER KING JR. BLVD., #450

City-St-Zip: TAMPA, FL 33607 US

Title: D

Name: DIPIETRO, JON G M.D.

Address: 2727 W. MARTIN LUTHER KING JR. BLVD., #450

City-St-Zip: TAMPA, FL 33607 US

Title: [

Name: SAINZ DE LA PENA, MANUEL C M.D.

Address: 2727 W. MARTIN LUTHER KING JR. BLVD., #450

City-St-Zip: TAMPA, FL 33607 US

I hereby 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 all other like empowered.

SIGNATURE: NORMAN CASTELLANO MD 04/30/2012