



FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P95 0000 47764			
1. Corporation Name SUN COAST RECOVERY AGENCY, INC.			
Principal Place of Business		Mailing Address	
2. Principal Place of Business		2a. Mailing Address	
21 999 9th Street South	26 7067 P.O. Box	3. Date Incorporated or Qualified 06/12/95	
22 Suite 103	27 Suite, Apt. #, etc.	3a. Date of Last Report 05/01/96	
23 Naples FL	28 Naples FL	4. FEI Number 65-0601926	
24 34102	29 34101	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
25 USA	30 USA	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
		81 Name Jeff Schelling	
		82 Street Address (P.O. Box Number is Not Acceptable) 999 9th Street South	
		83 Suite 103	
		84 City Naples	
		85 Zip Code 34102	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE  JEFF SCHELLING 04/30/97			
(NOTE: Registered Agent signature required when reinstating)			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE <input type="checkbox"/> DELETE		1.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
1.2 NAME		1.2 NAME JEFF SCHELLING	
1.3 STREET ADDRESS		1.3 STREET ADDRESS 386 EMERALD BAY CIRCLE 6-5	
1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP NAPLES, FL 34110	
2.1 TITLE <input type="checkbox"/> DELETE		2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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