2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000037447

Entity Name: MILLENNIUM RECEIVABLE SOLUTIONS, INC.

FILED Apr 30, 2003 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2005 PAN AM CIRCLE DRIVE SUITE 800

TAMPA, FL 33607

P. O. BOX 21947 TAMPA, FL 33622

Current Mailing Address: New Mailing Address:

2005 PAN AM CIRCLE DRIVE SUITE 800

TAMPA, FL 33607

P. O. BOX 21947 TAMPA, FL 33622

FEI Number: 59-3443071 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:

DEBENEDICTIS, ANTHONY 3010 W CHAPIN AVE TAMPA, FL 33611 US DEBENEDICTIS, ANTHONY P. O. BOX 21947 TAMPA, FL 33622 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: 04/30/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

 Title:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 MCGINCHLEY, PATRICIA
 Name:
 MCGINCHLEY, PATRICIA

 Address:
 3010 W CHAPIN AVE
 Address:
 P. O. BOX 21947

City-St-Zip: TAMPA, FL 33611 City-St-Zip: TAMPA, FL 33622

 Title:
 D
 (X) Delete
 Title:

 Name:
 CASON, JOHN
 Name:

 Address:
 4115 W DALE AVE
 Address:

 City-St-Zip:
 TAMPA, FL 33609
 City-St-Zip:

Name: DEBENEDICTIS, ANTHONY Name: DEBENEDICTIS, ANTHONY

 Address:
 3010 E CHAPIN AVENUE
 Address:
 P. O. BOX 21947

 City-St-Zip:
 TAMPA, FL 33811
 City-St-Zip:
 TAMPA, FL 33622

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: ANTHONY DEBENEDICTIS D 04/30/2003