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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000050694 (3)

ASSOCIATED COLLECTION SERVICES, INC.

Principal Place of Business Mailing Address				
1806 CORTEZ ROAD WEST			ST	DO NOT WRITE IN THIS SPACE
Dingshiron 12 gasor		Olinoan Ta Olego		3. Date Incorporated or Qualified
				06/06/1997
	lace of Business	2a. Mailing Address		4. FEI Number 65-0772049 Applied For Not Applicable
Suite, Apt	# Atc	Suite, Apt. #, etc.		\$9.75 Additional
22		27		6. Certificate of Status Desired Fee Required
City & State	0	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Z _I p	Country	8. This corporation owes or has paid the current year Intangible
24	A Name and Address of Curren	29	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
Name and Address of Current Registered Agent			B1 Name	
APPLEGATE, THOMAS E 1808 CORTEZ ROAD WEST				
	ITE 108		82 Stree	et Address (P.O. Box Number is Not Acceptable)
	ADÉNTON FL 34207		83	
0,0	ADDITION 12 01201		94	
			84 City	FL 85 Zip Code
office or re agent. I a SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida. Such change was a lations of, Section 607,0505, Flo	authorized by the co orida Statutes.	od corporation submits this statement for the purpose of changing its registered progration's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered agr			ure required when reinstating) DATE
12.	D OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	APPLEGATE, THOMAS E	L_ OLLER	1.2 NAME	Change L Addition
STREET ADDRESS	3701 MANATEE AVE., WEST		1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL 34205		1.4 CITY-SI-ZIP	
TITLE	PRODUITOR 1 E 04200	☐ DELETE	2.1 TITLE	Change Addition
NAME			2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZIP			2. 4 CITY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	S
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		LLI DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	6
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 THILE	☐ Change ☐ Addition
NAME			5.2 NAME	C orange C Addition
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	']
TITLE		DELETE	6.1 TITLE	Change Addition
NAME		-	6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	
14 hereby c	certify that the information supplied w	ith this filing does not qualify fo	or the evenntion sta	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information
officer or a	on this annual report or supplements director of the corporation or the rec- or Block 13 if changed, or on an atta	eiver or trusted empowered to i	execute this report a	ignature shall have the same legal effect as if made under oath; that I am an as required by Chapter 607, Florida Statutes; and that my name appears in

CIONATURE, THANK F APPIFE

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FILED

May 11 1998 8:00am

Secretary of State