PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000036276

1. Corporation Name

MANATEE COUNTY COLLECTIONS, INC.

| Principal Place of Business | Mailing Address | |
|---|---|--|
| 1402 THIRD AVENUE, WEST BRADENTON FL 34205 | 1402 THIRD AVENUE, WEST Bradenton FL 34205 | |
| 2. Principal Place of Business | 2a. Mailing Address | |
| ─ , ' | | |
| 21 | 26 Suite, Apt. #, etc. | |
| ─ , ' | 26 Suite, Apt. #, etc. | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | |

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90187 021 ***150.00



Applied For Not Applicable \$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualifed

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

04/14/1998 4, FEI Number

| _ ZIP | Country | Щ, | ΔIP | | · y | | 8. This corporation of | | ent year mile | _ | M | |
|---|--|-------------------------|--------------------|----------------|---|--|--|-----------------------------|--------------------------|------------------------------|------------------------|--|
| 4 | 25 | 29 | | 30 | | | Personal Property | | | ∐ Yes | No | |
| | 9. Name and Address of Current I | Registe | ered Agent | | , | | 10. Name and Addre | ss of New F | Registered / | Agent | | |
| | | | | | 81 | Name | | | | | | |
| MACKEY, PETER J | | | | | 82 Street Address (D.O. Boy Number is Not Acceptable) | | | | | | | |
| MACKEY & MACKEY | | | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| 1402 THIRD AVENUE, WEST Bradenton FL 34205 | | | | | | 83 | | | | | | |
| | | | | | | | | | | | | |
| office or | t to the provisions of Sections 607.0502 registered agent, or both, in the State of am familiar with, and accept the obligatio | Florida | a, Such change was | s authorized | by t | -named corp the corporation | oration submits this state on's board of directors. I h | ment for the ereby accer | purpose of on the appoir | changing its itment as re | registered gistered | |
| SIGNATURE | Signature, typed or printed name of registered agent a | and title if | annicable (NC | TE: Registered | Agent | sionature require | d when reinstating) | | DATE | | | |
| 12. | OFFICERS AND | | | 13. | rajoin | signatoro require | ADDITIONS/CHAN | GES TO OF | FICERS AN | D DIRECTO | ORS IN 12 | |
| | D OFFICERS AND | שוועבע | DELETE | 1,1 TI | LE | 1 | | | | Change | Additio | |
| TITLE | • | | ے کردیے او | 1.2 N/ | | | | | | | • | |
| NAME | MACKEY, PETER J | | | | | 1000500 | | | | | | |
| STREET ADDRESS | | 1402 THIRD AVENUE, WEST | | | | ADDRESS | | | | | | |
| CITY-ST-ZIP | BRADENTON FL 34205 | | | | ry-st | -ZIP | | | | Change | Additio | |
| TITLE | | | ☐ DELETE | 2,1 TI | LE | | | | | ☐ Change | ☐ Audiac | |
| NAME | | | | 2.2 NA | ME | - 1 | | | | | | |
| STREET ADDRESS | s | | | 2.3 ST | REET. | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | | 2:4 C | TY-SI | r-ZIP | . | — | * 25. — men | | • | |
| TITLE | | | ☐ DELETE | 3.1 TT | Œ | | | | | Change | Addition | |
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| NAME | | | | | | ADDRESS | | | | | | |
| STREET ADDRESS | 8 | | | | | | | | | | | |
| CITY-ST-ZIP | | | □ DELETE | | TY-\$T | -ZIP | | | | Change | Additio | |
| TITLE | | | ☐ DELETE | 5.1 TT | | | | | • | | LJ Faddia | |
| NAME | | | | 5.2 N | | | | | | | | |
| STREET ADDRESS | s | | | | | ADDRESS | | | • | | | |
| CITY-ST-ZIP | | | | | TY-ST | •ZIP | | | | | | |
| TITLE | | | ☐ DELETÉ | 6.1 TI | | | | | | Change | ☐ Additio | |
| NAME 3 | KITTORY OF SHIP | | | 6.2 N | ME | | | | | | | |
| | s | | | 6.3 S | REET | ADDRESS | | | | | | |
| | 2 | | | 6.4 CI | TY-ST | -ZIP | | | | | | |
| CITY-ST-ZIP. | | | | | | | | | | | | |

an address, with all other like empowered. Block 12 or Block 13 if chan

SIGNATURE: