2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000090774

Entity Name: COLLECTIONS OF SARASOTA, INC.

FILED Jan 15, 2009 Secretary of State

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

1800 SECOND ST 1800 2ND. ST STE 808 STE 808

SARASOTA, FL 34236 SARASOTA, FL 34236

Current Mailing Address: New Mailing Address:

 1800 SECOND ST
 1800 2ND. ST

 STE 808
 STE 808

SARASOTA, FL 34236 SARASOTA, FL 34236

FEI Number: 65-0874669 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:

THOMISON, JAMES E
1800 SECOND ST
STE 808

THOMISON, JAMES E
1800 2ND. ST
STE 808

STE 808

SARASOTA, FL 34236 US SARASOTA, FL 34236 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: 01/15/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DVP () Delete Title: DVP (X) Change () Addition Name: WALTERS, JOEL W Name: WALTERS, JOEL W

 Name:
 WALTERS, JOEL W

 Address:
 1800 SECOND ST STE 808

 City-St-Zip:
 SARASOTA, FL 34236

 City-St-Zip:
 SARASOTA, FL 34236

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

 Name:
 LEVINE, STUART J
 Name:
 LEVINE, STUART J

 Address:
 1800 SECOND ST STE 808
 Address:
 1800 2ND ST STE 808

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:
 SARASOTA, FL 34236

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

 Name:
 THOMISON, JAMES E
 Name:
 THOMISON, JAMES E

 Address:
 1800 SECOND ST STE 808
 Address:
 1800 2ND. ST STE 808

 City-St-Zip:
 SARASOTA, FL 34236
 City-St-Zip:
 SARASOTA, FL 34236

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES E. THOMISON TREA 01/15/2009