

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H50483

**Entity Name:** PREFERRED COLLECTION AND MANAGEMENT SERVICES, INC.**FILED**  
**Mar 15, 2016**  
**Secretary of State**  
**CC4836402601****Current Principal Place of Business:**1000 N ASHLEY DR #600  
TAMPA, FL 33602**Current Mailing Address:**P O BOX 2964  
TAMPA, FL 33601**FEI Number: 59-2520795****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**KELLEY, DAVID M  
1705 MAGDALENE DR  
TAMPA, FL 33613 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: DAVID M KELLEY****03/15/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD
Name	READ, PAUL D
Address	418 MONTROSE AVE
City-State-Zip:	TEMPLE TERRACE FL 33617

Title	ST
Name	READ, PRISCILLA S
Address	418 MONTROSE AVE
City-State-Zip:	TEMPLE TERRACE FL 33617

Title	V
Name	GAFFORD, PAMELA R
Address	4115 IMPERIAL EAGLE DR
City-State-Zip:	VALRICO FL 33594

Title	VP
Name	KELLEY, DAVID M
Address	1705 MAGDALENE MANOR DR
City-State-Zip:	TAMPA FL 33613

*I hereby 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 all other like empowered.*

**SIGNATURE: PRISCILLA S READ****SEC/TREA****03/15/2016**

Electronic Signature of Signing Officer/Director Detail

Date