




No. W 26571	Due no later than October 31, 2005 Annual Report Form		2. Registered Agent and Office NO PO BOX CT CORPORATION SYSTEM 300 N 6TH ST BOISE, ID 83702												
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE	1. Mailing Address - Correct in this box, if applicable INTERNATIONAL COLLECTION AGENCY, L. 2801 PROFESSIONAL PKWY OCOEE, FL 34761		3. <u>New</u> Registered Agent Signature												
4. Limited Liability Companies: Enter Names and Addresses of Managers. <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Office held</u></th> <th style="text-align: left;"><u>Name</u></th> <th style="text-align: left;"><u>Street or P.O. Address</u></th> <th style="text-align: left;"><u>City</u></th> <th style="text-align: left;"><u>State</u></th> <th style="text-align: left;"><u>Zip</u></th> </tr> </thead> <tbody> <tr> <td>MANAGING AGENT</td> <td>THOMAS DUGAN</td> <td>5601 WINDHOWER DR.</td> <td>ORLANDO</td> <td>FL</td> <td>32819</td> </tr> </tbody> </table>				<u>Office held</u>	<u>Name</u>	<u>Street or P.O. Address</u>	<u>City</u>	<u>State</u>	<u>Zip</u>	MANAGING AGENT	THOMAS DUGAN	5601 WINDHOWER DR.	ORLANDO	FL	32819
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MANAGING AGENT	THOMAS DUGAN	5601 WINDHOWER DR.	ORLANDO	FL	32819										
5. Organized Under the Laws of: FLORIDA W 26571	6. <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 60%;"> Signature  </td> <td style="width: 40%;"> Date <u>8/22/05</u> </td> </tr> <tr> <td> Name (Typed or Printed) <u>THOMAS DUGAN</u> </td> <td> Title <u>MANAGING AGENT</u> </td> </tr> </table>			Signature 	Date <u>8/22/05</u>	Name (Typed or Printed) <u>THOMAS DUGAN</u>	Title <u>MANAGING AGENT</u>								
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