



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 120905		2. Name of Corporation AllianceOne Receivables Management, Inc.			
3. Street Address Principal Business Office 717 Constitution Dr. Ste 202		City Exton		State PA	Zip 19341
4. Business Phone No. (484) 531-5000		5. State of Incorporation DELAWARE			6. SIC Code 7322
7. Brief Description of the Character of Business Conducted in Rhode Island THIRD PARTY COLLECTION					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Robert C. Mauch			Vice President Name		
Street Address 717 Constitution Drive Suite 202			Street Address		
City Exton, PA	State PA	Zip 19341	City	State	Zip
Secretary Name Terry D. Weikel			Treasurer Name Edward Trahan		
Street Address 717 Constitution Drive Suite 202			Street Address 717 Constitution Drive Suite 202		
City Exton, PA	State PA	Zip 19341	City Exton, PA	State PA	Zip 19341
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Robert C. Mauch			Director Name		
Street Address 717 Constitution Drive Suite 202			Street Address		
City Exton, PA	State PA	Zip 19341	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
AUTHORIZED SHARES			ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
1,000 COMM \$0.01 PAR VALUE			100	Common	.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



120905

File Date	FILED
Check No	MAR 04 2005 063329
By	By RB-
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer Terry D. Weikel Date 1/13/06
Print or Type Name of Officer
Secretary
Title of Officer



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004
Filing Period: January 1 - March 1 • Filing Fee: \$50.00
(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No. 120905		2. Name of Corporation AllianceOne Receivables Management, Inc.		
3. Street Address Principal Business Office 717 Constitution Drive Suite 202		City Exton	State PA	Zip 19341
4. Business Phone No. 484/531-5021		5. State of Incorporation DELAWARE		6. SIC Code 7799
7. Brief Description of the Character of Business Conducted in Rhode Island THIRD PARTY COLLECTION				
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
President Name Robert C. Mauch		Vice President Name		
Street Address 717 Constitution Drive Suite 202		Street Address		
City Exton	State PA	Zip 19341	City	State
Secretary Name Terry D. Weikel		Treasurer Name Edward Tranan		
Street Address 717 Constitution Drive Suite 202		Street Address 717 Constitution Drive, Suite 202		
City Exton	State PA	Zip 19341	City Exton	State PA
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS				
Director Name Robert C. Mauch		Director Name		
Street Address 717 Constitution Drive Suite 202		Street Address		
City Exton	State PA	Zip 19341	City	State
Director Name		Director Name		
Street Address		Street Address		
City	State	Zip	City	State
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES				
Number of Shares		Class/Series	Par Value	
1,000 COMM \$0.01 PAR VALUE				
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES				
Number of Shares		Class/Series	Par Value	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 2 0 9 0 5 *

File Date 2.4.04
Check No. 51840
By: 160

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

01/28/03
Date

Terry Weikel
Print or Type Name of Officer

Secretary
Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.

120905

2. Name of Corporation

AllianceOne Receivables Management, Inc.

3. Street Address Principal Business Office

717 Constitution Dr, Suite 202

City

EXTON

State

PA

Zip

19341

4. Business Phone No.

484-531-5021

5. State of Incorporation

DELAWARE

6. SIC Code

7799

7. Brief Description of the Character of Business Conducted in Rhode Island

Collection & Receivables Management

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

President Name

Robert C. Mauch

Vice President Name

Street Address

717 Constitution Dr, Suite 202

Street Address

City

State

PA

Zip

19341

City

State

Zip

Secretary Name

Terry D. Weikel

Treasurer Name

Edward Trahan

Street Address

717 Constitution Dr, Suite 202

Street Address

717 Constitution Dr, Suite 202

City

State

PA

Zip

19341

City

State

PA

Zip

19341

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT)

FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name

Robert C. Mauch

Director Name

Street Address

717 Constitution Dr, Suite 202

Street Address

City

State

PA

Zip

19341

City

State

Zip

Director Name

Gregory S. Campbell

Director Name

Street Address

8 Twin Creek Lane

Street Address

City

State

PA

Zip

19312

City

State

Zip

10. SHARES AUTHORIZED (*X* BOX FOR ATTACHMENT)

11. SHARES ISSUED (*X* BOX FOR ATTACHMENT)

AUTHORIZED SHARES

ISSUED SHARES

Number of Shares

Class/Series

Par Value

1,000 COMM \$0.01 PAR VALUE

Number of Shares

Class/Series

Par Value

100

Common

.01

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 2 0 9 0 5 *

File Date:

2-18-03

Check No.:

39175

By:

UP

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Terry D. Weikel

Date

1-22-03

Print or Type Name of Officer

Secretary

Title of Officer



STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040



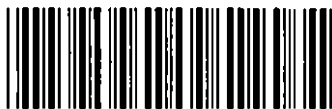
PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No. 120905		2. Name of Corporation AllianceOne Receivables Management, Inc.	
3. Street Address Principal Business Office 690 Stockton Dr. Suite 200		City EXTON	State PA
4. Business Phone No. 484-531-5021		5. State of Incorporation DELAWARE	Zip 19341
6. SIC Code			
7. Brief Description of the Character of Business Conducted in Rhode Island Accounts Receivable Management			
8. NAMES AND ADDRESSES OF THE OFFICERS ("X" BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
President Name Robert C. Mauch		Vice President Name Chris Debbas	
Street Address 690 Stockton Dr. Suite 200		Street Address 1235 Westlakes Dr	
City EXTON	State PA	City Berwyn	State PA
Zip 19341		Zip 19312	
Secretary Name Terry D. Weikel		Treasurer Name Terry D. Weikel	
Street Address 690 Stockton Dr. Suite 200		Street Address 690 Stockton Dr. Suite 200	
City EXTON	State PA	City EXTON	State PA
Zip 19341		Zip 19341	
9. NAMES AND ADDRESSES OF THE DIRECTORS ("X" BOX FOR ATTACHMENT) • FILL IN SPACES BEFORE USING ATTACHMENTS			
Director Name Robert C. Mauch		Director Name	
Street Address 690 Stockton Dr. Suite 200		Street Address	
City EXTON	State PA	City	State
Zip 19341			Zip
Director Name Gregory S. Campbell		Director Name	
Street Address 1235 Westlakes Dr.		Street Address	
City Berwyn	State PA	City	State
Zip 19312			Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT)			
AUTHORIZED SHARES			
Number of Shares	Class/Series	Par Value	
1,000 COMM \$0.01 PAR VALUE			
11. SHARES ISSUED ("X" BOX FOR ATTACHMENT)			
ISSUED SHARES			
Number of Shares	Class/Series	Par Value	
100	Common	.01	

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee



* 1 2 0 9 0 5 *

File Date: 2-11-02
27219
Check No.: 2
By: _____

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer: Terry D. Weikel Date: 2-7-02
Print or Type Name of Officer: Terry D. Weikel
Title of Officer: Sec. / Tres.