



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 116975		2. Name of Corporation eCAST Settlement Corporation			
3. Street Address Principal Business Office 383 Madison Avenue			City New York,	State NY	Zip 10179-0024
4. Business Phone No (212) 272-2000		5. State of Incorporation DELAWARE			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island TO INVEST IN DEFAULTED CONSUMER CREDIT ACCOUNTS AND INSTALLMENT SALES AGREEMENTS BY PURCHASING SUCH ACCOUNTS AND AGREEMENTS FROM CREDITORS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Charles J. Rusbasan			Vice President Name Executive Vice President Edward P. Benison		
Street Address 383 Madison Avenue,			Street Address 383 Madison Avenue		
City New York,	State NY	Zip 10179-0024	City New York,	State NY	Zip 10179-0024
Secretary Name Timoth E. Stapleford			Treasurer Name Edward P. Benison		
Street Address 383 Madison Avenue			Street Address 383 Madison Avenue		
City New York,	State NY	Zip 10179-0024	City New York,	State NY	Zip 1079-0024
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Charles J. Rusbasan			Director Name Edward P. Benison		
Street Address 383 Madison Avenue			Street Address 383 Madison Avenue		
City New York,	State NY	Zip 10179-0024	City New York	State NY	Zip 10179-0024
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
10. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> AUTHORIZED SHARES			11. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> ISSUED SHARES		
Number of Shares	Class/Series	Par Value	Number of Shares	Class/Series	Par Value
100 COMM \$1.00 PAR VALUE			100	Common	\$1.00

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



116975

File Date	2-24-05
Check No.	2310875
By:	2
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 Edward P. Benison Date 02/14/05

Edward P. Benison
Print or Type Name of Officer

Executive Vice President & Treasurer
Title of Officer

eCAST Settlement Corporation

Officers and Directors

2/24/05

NAME	TITLE	BUSINESS ADDRESS
Charles J. Rusbasan	Chief Executive Officer President Director	A
Edward P. Benison	Executive Vice President Treasurer Director	A
Timothy E. Stapleford	Executive Vice President Secretary	A
Jeffrey M. Farber	Controller	B
Andrew Berardi	Vice President	A
Philip M. Sher	Vice President	A
Glenn V. Herman	Tax Director	B

A. 383 Madison Avenue
New York, NY 10179-0024

B. One Metrotech Center North
Brooklyn, NY 11201-3859

FILED

FEB 24 2005

By _____



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. 116975		2. Name of Corporation eCAST Settlement Corporation			
3. Street Address Principal Business Office 383 Madison Avenue			City New York,	State NY	Zip 10179-0024
4. Business Phone No (212) 272-2000		5. State of Incorporation DELAWARE			6. SIC Code
7. Brief Description of the Character of Business Conducted in Rhode Island TO INVEST IN DEFAULTED CONSUMER CREDIT ACCOUNTS AND INSTALLMENT SALES AGREEMENTS BY PURCHASING SUCH ACCOUNTS AND AGREEMENTS FROM CREDITORS.					
8. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Charles J. Rusbasan			Vice President Name Executive Vice President Edward P. Benison		
Street Address 383 Madison Avenue			Street Address 383 Madison Avenue		
City New York,	State NY	Zip 10179-0024	City New York,	State NY	Zip 10179-0024
Secretary Name Timoth E. Stapleford			Treasurer Name Edward P. Benison		
Street Address 383 Madison Avenue			Street Address 383 Madison Avenue		
City New York,	State NY	Zip 10179-0024	City New York,	State NY	Zip 10179-0024
9. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input checked="" type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Charles J. Rusbasan			Director Name Edward P. Benison		
Street Address 383 Madison Avenue			Street Address 383 Madison Avenue		
City New York,	State NY	Zip 10179-0024	City New York,	State NY	Zip 10179-0024
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
New York,	NY	10179-0024	New York,	NY	10179-0024
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
New York,	NY	10179-0024	New York,	NY	10179-0024
Director Name			Director Name		
Street Address			Street Address		
City			City		
State			State		
Zip			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
100 COMM \$1.00 PAR VALUE			100	Common	\$1.00

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



File Date	2-9-04
Check No.	2241103
By:	WP
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.

Edward P. Benison
Signature of Officer

01/27/04
Date

Edward P. Benison

Print or Type Name of Officer

Treasurer & Executive Vice President

Title of Officer

eCAST Settlement Corporation

Officers and Directors

1/26/04

NAME	TITLE	BUSINESS ADDRESS
Charles J. Rusbasan	Chief Executive Officer President Director	A
Edward P. Benison	Executive Vice President Treasurer Director	A
Timothy E. Stapleford	Executive Vice President Secretary	A
Jeffrey M. Farber	Controller	B
Andrew Berardi	Vice President	A
Howard C. Knauer	Vice President	A
Martin Schwam	Vice President	A
Philip M. Sher	Vice President	A
Glenn V. Herman	Tax Director	B

A. 383 Madison Avenue
New York, NY 10179-0024

B. One Metrotech Center North
Brooklyn, NY 11201-3859



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.

116975

2. Name of Corporation

eCAST Settlement Corporation

3. Street Address Principal Business Office

383 Madison Avenue

4. Business Phone No.

(212) 272-2000

5. State of Incorporation

DELAWARE

City

New York

State

NY

Zip

10179-0024

6. SIC Code

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

Buys charged-off debts from banks and financial institutions

8. NAMES AND ADDRESSES OF THE OFFICERS (*X* BOX FOR ATTACHMENT) **X FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name

Charles J. Rusbasan

Street Address

383 Madison Avenue,

City

New York,

State

NY

Zip

10179-0024

Secretary Name

Jeffrey Moses

Street Address

383 Madison Avenue

City

New York,

State

NY

Zip

10179-0024

Vice President Name

Jeffrey Moses

Street Address

383 Madison Avenue

City

New York,

State

NY

Zip

10179-0024

Treasurer Name

Jeffrey Moses

Street Address

383 Madison Avenue

City

New York,

State

NY

Zip

10179-0024

9. NAMES AND ADDRESSES OF THE DIRECTORS (*X* BOX FOR ATTACHMENT) **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name

Charles J. Rusbasan

Street Address

383 Madison Avenue

City

New York,

State

NY

Zip

10179-0024

Director Name

Edward P. Benison

Street Address

383 Madison Avenue

City

New York

State

NY

Zip

10179-0024

Director Name

Jeffrey Moses

Street Address

383 Madison Avenue

City

New York,

State

NY

Zip

10179-0024

Director Name

Street Address

City

State

Zip

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

AUTHORIZED SHARES

Number of Shares

Class/Series

Par Value

100 COMM \$1.00 PAR VALUE

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

ISSUED SHARES

Number of Shares

Class/Series

Par Value

100

Common

\$1.00

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



* 1 1 6 9 7 5 *

File Date:

2-28-03

Check No.:

2174301

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

Charles J. Rusbasan

Print or Type Name of Officer

President

Title of Officer

02/24/03

Date

eCAST Settlement Corporation

Officers and Directors

2/20/03

NAME	TITLE	BUSINESS ADDRESS
Charles J. Rusbasan	Chief Executive Officer President Director	A
Marshall J Levinson	Controller	B
Jeffrey Moses	Vice President Secretary Treasurer Director	A
Edward P. Benison	Vice President Director	A
Andrew Berardi	Vice President	A
Howard C. Knauer	Vice President	A
Timothy E. Stapleford	Vice President	A
Jeffrey M. Farber	Assistant Controller	B
Glenn V. Herman	Tax Director	B

- A. 383 Madison Avenue
New York, NY 10179
- B. One Metrotech Center North
Brooklyn, NY 11201-3859



PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002
Filing Period: January 1-March 1 • Filing Fee: \$50.00

(FOIL - MUST BE TYPED IN BLACK)

1. Corporate ID No. **116975** 2. Name of Corporation **eCAST Settlement Corporation**

3. Street Address Principal Business Office **383 Madison Avenue** City **New York,** State **NY** Zip **10179**
4. Business Phone No. **(212) 272-2000** 5. State of Incorporation **DELAWARE** 6. SIC Code

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

buys charged-off consumer debt from banks and financial institutions.

8. NAMES AND ADDRESSES OF THE OFFICERS (FILL IN BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name Charles J. Rusbasan Street Address 383 Madison Avenue City New York State NY Zip 10179	Vice President Name Jeffrey Moses Street Address 383 Madison Avenue City New York State NY Zip 10179
Secretary Name Jeffrey Moses Street Address 383 Madison Avenue City New York State NY Zip 10179	Treasurer Name Jeffrey Moses Street Address 383 Madison Avenue City New York State NY Zip 10179

9. NAMES AND ADDRESSES OF THE DIRECTORS (FILL IN BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name Edward Benison Street Address 383 Madison Avenue City New York State NY Zip 10179	Director Name Jeffrey Moses Street Address 383 Madison Avenue City New York State NY Zip 10179
Director Name Charles J. Rusbasan Street Address 383 Madison Avenue City New York, State NY Zip 10179	

10. SHARES AUTHORIZED (FILL IN BOX FOR ATTACHMENT)

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
100 COMMON	\$1.00 PAR VALUE	

11. SHARES ISSUED (FILL IN BOX FOR ATTACHMENT)

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
100	Common	\$1.00

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

Date: 08/08/02



* 1 1 6 9 7 5 *

Charles J. Rusbasan, President

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

Date

John M. Garzone

Print or Type Name of Officer

Executive Vice President, Secretary &

Title of Officer