JACKSONVILLE, FL 32226	
FEI Number: APPLIED FOR	Certificate of Status Desired:
Name and Address of Current Registered Agent:	
JIMMIE, FIELDS 1840 DUNN AVE 5 JACKSONVILLE, FL 32218 US	
The above named entity submits this statement for the purpose of changing its registered office or regis	tered agent, or both, in the State of Florida.
SIGNATURE: JIMMIE FIELDS	02/
Electronic Signature of Registered Agent	

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000090884

Entity Name: 1ST CLASS CREDIT SERVICE INC.

Current Principal Place of Business:

1840 DUNN AVE 5 JACKSONVILLE, FL 32218

Current Mailing Address:

P. O. BOX 26032 JA

F

SIGNATURE	: JIMMIE FIELDS			02/28/2014
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	P	Title	COO	
Name	FIELDS, YOULONDA	Name	FIELDS, JIMMIE	
Address	1840 DUNN AVE	Address	1840 DUNN AVE	
City-State-Zip:	JACKSONVILLE FL 32218	City-State-Zip:	JACKSONVILLE FL 32218	
Title	CFO			
Name	FIELDS, TAIRESCE			
Address	409 JAX ESTATES DRIVE			
City-State-Zip:	JACKSONVILLE FL 32218			

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: JIMMIE FIELDS

COO

02/28/2014 Date

Electronic Signature of Signing Officer/Director Detail

esired: No