

**2017 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  
JACKSONVILLE, FL 32226

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

**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 registered agent, or both, in the State of Florida.*

**SIGNATURE:** JIMMIE FIELDS

**04/25/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name FIELDS, YOULONDA  
Address 1840 DUNN AVE  
City-State-Zip: JACKSONVILLE FL 32218

Title COO  
Name FIELDS, JIMMIE  
Address 1840 DUNN AVE  
City-State-Zip: JACKSONVILLE FL 32218

Title CFO  
Name FIELDS, TAIRESCA  
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**

**04/25/2017**

Electronic Signature of Signing Officer/Director Detail

Date