

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000000559

Entity Name: CREDIT PLUS, INC.**Current Principal Place of Business:**31550 WINTERPLACE PARKWAY
SALISBURY, MD 21804**Current Mailing Address:**31550 WINTERPLACE PARKWAY
SALISBURY, MD 21804 US**FEI Number:** 52-2077522**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SECRETARY
Name	HALL, DOUGLAS M.
Address	31550 WINTERPLACE PARKWAY
City-State-Zip:	SALISBURY MD 21804

Title	TREASURER
Name	GRIM, DONALD G.
Address	31550 WINTERPLACE PARKWAY
City-State-Zip:	SALISBURY MD 21804

Title	VP, DIRECTOR
Name	GRANT, STEPHEN A
Address	31550 WINTERPLACE PARKWAY
City-State-Zip:	SALISBURY MD 21804

Title	PRESIDENT, DIRECTOR
Name	GRANT, STEVEN D.
Address	31550 WINTERPLACE PARKWAY
City-State-Zip:	SALISBURY MD 21804

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: DONALD G. GRIM**TREASURER****05/12/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date