, 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #814361

1. Entity Name

AFCO CREDIT CORPORATION



FILED Jan 23, 2006 08:00 AN **Secretary of State**

Principal Place of Business

110 WILLIAM ST

29TH FL

NEW YORK, NY 10038

Mailing Address

110 WILLIAM ST

29TH FL

NEW YORK, NY 10038



DO NOT WRITE IN THIS SPACE

01102006 No Chg-P CR2E034 (11/05)

4. FEI Number 13-5647901

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM 12000 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

DO NOT WRITE IN THIS SPACE

8. The above the obliga	e named entity submits this statement for the pations of registered agent.	urpose of changing its re	gistered office or r	egistered agent, or bo	oth, in the State of Florida. I am fa	miliar with, and accept
SIGNATURE.				required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campal				\$5.00 May Be Added to Fees	1100000396048 01/27/06-80017-0	003 150.00
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT GOLD, BRUCE R 311 HILL FARM LANE VALENCIA, PA 16059					•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS RATNER, ROBERT J 839 LAMBERTS MILL ROAD WESTFIELD, NJ 07090		ETA VIR AL.			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZUPAN, DARYL J 41 OAKMONT CT BRIDGEVILLE, PA 15017			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V REINKE, ROBERT J 371 SOUTH DUNES DR CAPTAINS Q PAWLEYS ISLAND, SC 29585	TRS	27.5. A	IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHESKO, JOHN T 25 OLD TIMBER TRAIL PITTSBURGH, PA 15238			er		2
TITLE NAME STREET ADDRESS GITY-SI-ZIP	V WIESER, SARAH H 372 CENTRAL PARK WEST APT 2A NEW YORK NY 10025		•	e e e e e e e e e e e e e e e e e e e	e transition of the second section of the section of the second section of the section of the second section of the section o	The state of the s

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Daryl J. Zupan

412-234-2472

PED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND

Daysme Phone #