

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90038 008 ***150.00

DOCUMENT # F00000002162					
1. Entity Name ECREDIT.COM, INC.					
Principal Place of Business 20 CAREMATRIX DRIVE DEDHAM, MA 02026			Mailing Address 20 CAREMATRIX DRIVE DEDHAM, MA 02026		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 04-3204273	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent	
Name				Street Address (P.O. Box Number is Not Acceptable)	
City				FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	SEE attached list of officers and DIRECTORS
NAME	ADVANI, KAMAL		NAME		
STREET ADDRESS	435 DEVON PK DR, 600 SAFEGUARD BLDG		STREET ADDRESS		
CITY-ST-ZIP	BOSTON, MA 02116		CITY-ST-ZIP		
TITLE	CEO	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	RICHMOND, CHRISTOPHER		NAME		
STREET ADDRESS	20 CAREMATRIX DRIVE		STREET ADDRESS		
CITY-ST-ZIP	DEDHAM, MA 02026		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *[Signature]* **SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **4/6/04** **781-752-1343**
Date Daytime Phone #

Attachments

54034763



F0100000 2/62

Officers

April 2004

Mr. Deepak Verma

Title: CEO

Business Address:

eCredit.com, Inc.
20 Carematrix Drive
Dedham, MA 02026

Mr. Jeffrey Dickerson

Title: President

Business Address:

eCredit.com, Inc.
20 Carematrix Drive
Dedham, MA 02026

Mr. Charles Schmidt

Title: General Counsel and
Secretary

Business Address:

eCredit.com, Inc.
20 Carematrix Drive
Dedham, MA 02026

Mr. James Butler

Title: Chief Technology Officer
and Executive Vice President

Business Address:

eCredit.com, Inc.
20 Carematrix Drive
Dedham, MA 02026

Mr. Joel Freedenberg

Title: Treasurer and Corporate
Controller

Business Address:

eCredit.com, Inc.
20 Carematrix Drive
Dedham, MA 02026

54034763

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Mr. Deepak Verma

Title: Director

Business Address:

20 Carematrix Drive

Dedham, MA 02026

Wayne, PA 19087

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Chicago, IL 60606

Wayne, PA 19087

Natick, Massachusetts 01760

Baltimore, MD 21209

Dedham, MA 02026