

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002171

FILED
Feb 09, 2012
Secretary of State

Entity Name: PIONEER CREDIT RECOVERY, INC.

Current Principal Place of Business:

26 EDWARD ST
ARCADE, NY 14009

New Principal Place of Business:

Current Mailing Address:

20 PARKER LANE
ATTN: LICENSING
PERRY, NY 14530

New Mailing Address:

FEI Number: 30-0002602

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: FRAZIER, JACK E JR.
Address: 26 EDWARD ST
City-St-Zip: ARCADE, NY 14009

Title: TRES
Name: TERRY, JOHN A
Address: 300 CONTINENTAL DRIVE
City-St-Zip: NEWARK, DE 19713

Title: DIR
Name: LUDWICK, JOAN M
Address: 26 EDWARD STREET
City-St-Zip: ARCADE, NY 14009

Title: VP
Name: MERSMANN, JEFFERY
Address: 26 EDWARD STREET
City-St-Zip: ARCADE, NY 14009

Title: SEC
Name: BENTON (ASSIST SECR), CARYN L
Address: 26 EDWARD STREET
City-St-Zip: ARCADE, NY 14009

Title: TRES
Name: JOHNSON (ASST TRES), GRETCHEN
Address: 2001 EDMUND HALLEY DRIVE
City-St-Zip: RESTON, VA 20191

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: JOHN A TERRY

TRES

02/09/2012

Electronic Signature of Signing Officer or Director

Date