2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2009
Secretary of State

DOCUMENT# F02000004440

Entity Name: FIDELITY NATIONAL CREDIT SERVICES, LTD. INC.

Current Principal Place of Business:

2411 N. GLASSELL ST.
ORANGE, CA 92865

New Principal Place of Business:

Current Mailing Address:

2421 N. GLASSELL ST.
ORANGE, CA 92865

New Mailing Address:

FEI Number: 13-3444680 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: DALEY, TOM PRES
Address: 2663 N. VISTA VALLEY RD.
City-St-Zip: ORANGE, CA 92867

Title: S ( ) Delete
Name: SCHROEDER, TRICIA SEC
Address: 18945 CANYON HILL DR.
City-St-Zip: TRABUCO CANYON, CA 92679

Title: D ( ) Delete
Name: SHAW, JEROME DIR
Address: 7245 RUE DE ORAK
City-St-Zip: LA JOLLA, CA 92037

Title: ED ( ) Delete
Name: FERRELL, DOROTHY C EX DIR
Address: 723 S OAKWILDE DR
City-St-Zip: ANAHEIM, CA 92807 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DOROTHY FERRELL ED 01/20/2009

Electronic Signature of Signing Officer or Director — Date