
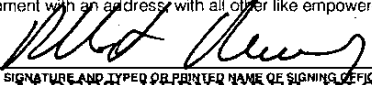


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2005 8:00 am
Secretary of State

02-02-2005 90034 011 ***150.00

DOCUMENT # F02000005038 1. Entity Name CREDIT UNION SERVICES INCORPORATED					
Principal Place of Business 8131 LBJ FRWY STE. 400 DALLAS, TX 75251			Mailing Address 8131 LBJ FRWY STE. 400 DALLAS, TX 75251		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 75-2623130	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> 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	
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.				FL Zip Code	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		
\$5.00 May Be Added to Fees					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C NEICE, TOM 8131 LBJ FRWY STE. 550 DALLAS, TX 75251	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sr: V.P./COO Eric Pointer 8131 LBJ Frwy Ste 400 Dallas TX 75251
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD THOMPSON, GERALD 8131 LBJ FRWY STE. 550 DALLAS, TX 75251	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P./Sales Derek Beard 8131 LBJ Frwy Ste 400 Dallas TX 75251
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GURNEY, JEFFREY W 8131 LBJ FRWY STE. 400 DALLAS, TX 75251	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P./Project Risk Albert Hernandez 8131 LBJ FRWY Ste 400 DALLAS TX 75251
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SORRELS, KENNETH 8131 LBJ FRWY STE. 550 DALLAS, TX 75251	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P./Project Risk Albert Hernandez 8131 LBJ FRWY Ste 400 DALLAS TX 75251
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEWMAN, ELIZABETH 8131 LBJ FRWY STE 550 DALLAS, TX 75251	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P./Project Risk Albert Hernandez 8131 LBJ FRWY Ste 400 DALLAS TX 75251
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS 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: 				1-26-05 972-664-1088	
ALBERT HERNANDEZ-VICE PRES.				Date Daytime Phone #	

40010490



01262005 Chg-P CR2E034 (10/03)