

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004170

FILED
Jan 08, 2007
Secretary of State

Entity Name: CREDIT FOUNDATION OF AMERICA, CORP.

Current Principal Place of Business:

23101 LAKE CENTER DRIVE, SUITE 110
LAKE FOREST, CA 92618

New Principal Place of Business:

23101 LAKE CENTER DRIVE, SUITE 110
LAKE FOREST, CA 92630

Current Mailing Address:

23101 LAKE CENTER DRIVE, SUITE 110
LAKE FOREST, CA 92618

New Mailing Address:

23101 LAKE CENTER DRIVE, SUITE 110
LAKE FOREST, CA 92630

FEI Number: 26-0060880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS LEGAL SERVICES, INC.
155 OFFICE PLAZA DR.
SUITE A
TALLAHASSEE, FL 32301 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: C () Delete
Name: CARA, TONY
Address: 23101 LAKE CENTER DR, STE 110
City-St-Zip: LAKE FOREST, CA 92630

Title: V () Delete
Name: MORRIS, GERALD
Address: 23101 LAKE CENTER DR, STE 110
City-St-Zip: LAKE FOREST, CA 92630

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: CARA, ANTHONY C
Address: 23101 LAKE CENTER DR, STE 110
City-St-Zip: LAKE FOREST, CA 92630

Title: SCTY (X) Change () Addition
Name: MORRIS, GERALD D
Address: 23101 LAKE CENTER DR, STE 110
City-St-Zip: LAKE FOREST, CA 92630

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GERALD D MORRIS

SCTY

01/08/2007

Electronic Signature of Signing Officer or Director

_____ Date