## 2006 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# F04000001049

**Entity Name: IFC CREDIT CORPORATION** 

FILED Oct 10, 2006 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 8700 WAUKEGAN ROAD, SUITE 100 MORTON GROVE, IL 60053 **Current Mailing Address: New Mailing Address:** 8700 WAUKEGAN ROAD, SUITE 100 MORTON GROVE, IL 60053 FEI Number: 36-3608485 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: RUDOLPH TREBELS Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete () Change () Addition TREBELS, RUDOLPH D Name: Name: 8700 WAUKEGAN ROAD, SUITE 100 Address: Address: City-St-Zip: MORTON GROVE, IL 60053 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition Name: ESTOK, JOHN Name: ESTOK, JOHN J. 8700 WAUKEGAN ROAD, SUITE 100 8700 WAUKEGAN ROAD, SUITE 100 Address: Address: MORTON GROVE, IL 60053 MORTON GROVE, IL 60053 City-St-Zip: City-St-Zip: (X) Change ( ) Addition Title: ( ) Delete Title: VΡ TREBELS, GARY TREBELS, GARY Name: Name: 8700 WAUKEGAN ROAD, SUITE 100 8700 WAUKEGAN ROAD, SUITE 100 Address: Address: MORTON GROVE, IL 60053 City-St-Zip: MORTON GROVE, IL 60053 City-St-Zip: Title: () Delete Title: () Change () Addition KILEY, JAMES Name: Name: Address: 908 N MICHIGAN AVENUE, SUITE 1080 Address: City-St-Zip: CHICAGO, IL 60611 City-St-Zip: Title: Title: () Delete () Change () Addition WHITE, JAMES JR. Name: Name: 1000 JACKSON AVENUE Address: Address: City-St-Zip: TOLEDO, OH 43624 City-St-Zip: Title: () Delete Title: () Change () Addition Name: LUDWIG, LEN Name: 4500 SW KRUSE WAY, SUITE 350 Address: Address: City-St-Zip: City-St-Zip: LAKE OSWEGO, OR 97035

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RUDOLPH D. TREBELS P 10/10/2006