

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000006460

Entity Name: MEDICREDIT, INC.

FILED
Mar 18, 2010
Secretary of State

Current Principal Place of Business:

THREE CITYPLACE DRIVE, STE. 690
ST. LOUIS, MO 63141

New Principal Place of Business:

3620 I-70 DR. SE, SUITE C
COLUMBIA, MO 65201

Current Mailing Address:

THREE CITYPLACE DRIVE, STE. 690
ST. LOUIS, MO 63141

New Mailing Address:

FEI Number: 43-1123539 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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: DPS
Name: DIMARCO, MICHAEL A
Address: THREE CITYPLACE DRIVE, STE. 690
City-St-Zip: ST LOUIS, MO 63141

Title: CEO
Name: DIMARCO, MICHAEL A
Address: THREE CITYPLACE DRIVE, STE. 690
City-St-Zip: ST LOUIS, MO 63141

Title: SEC
Name: ROWLAND, MARK D
Address: THREE CITYPLACE DRIVE, STE. 690
City-St-Zip: ST LOUIS, MO 63141

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: MARK D ROWLAND

SEC

03/18/2010

Electronic Signature of Signing Officer or Director

Date