

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000005773

FILED
Feb 19, 2008
Secretary of State

Entity Name: LINDEN RESIDENTIAL CREDIT CORP.

Current Principal Place of Business:

4175 VETERANS MEMORIAL HWY.
SUITE 408
RONKONKOMA, NY 11779

New Principal Place of Business:

Current Mailing Address:

4175 VETERANS MEMORIAL HWY.
SUITE 408
RONKONKOMA, NY 11779

New Mailing Address:

FEI Number: 01-0716580

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: KLOSKA, NANCY D
Address: 35 PINELAWN ROAD, SUITE 104E
City-St-Zip: MELVILLE, NY 11747

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: KLOSKA, NANCY D
Address: 4175 VETERANS MEMORIAL HIGHWAY SUITE 408
City-St-Zip: RONKONKOMA, NY 11779

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: NANCY KLOSKA

CEO

02/19/2008

Electronic Signature of Signing Officer or Director

Date