

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001071

FILED
Mar 05, 2009
Secretary of State

Entity Name: CREDIT ADJUSTMENTS, INC

Current Principal Place of Business:

330 FLORENCE STREET
DEFIANCE, OH 43512

New Principal Place of Business:

Current Mailing Address:

330 FLORENCE STREET
DEFIANCE, OH 43512

New Mailing Address:

FEI Number: 34-0941570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPRECHMAN, STEVEN B
2775 SUNNY ISLES BOULEVARD
NO. 100
NORTH MIAMI BEACH, FL 331604007 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: PD () Delete
Name: OSBORNE, MICHAEL S
Address: 330 FLORENCE STREET
City-St-Zip: DEFIANCE, OH 43512

Title: VD () Delete
Name: OSBORNE, JASON
Address: 330 FLORENCE STREET
City-St-Zip: DEFIANCE, OH 43512

Title: ST () Delete
Name: MCDANIEL, GENEVA
Address: 330 FLORENCE STREET
City-St-Zip: DEFIANCE, OH 43512

Title: V () Delete
Name: WEISNER, DAVID
Address: 330 FLORENCE STREET
City-St-Zip: DEFIANCE, OH 43512

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: DAVID WEISNER

VP

03/05/2009

Electronic Signature of Signing Officer or Director

Date