

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 29, 2008 8:00 am**  
**Secretary of State**

04-29-2008 90095 017 \*\*\*150.00

**DOCUMENT # F94000001114**

1. Entity Name  
**BENEFICIAL CREDIT SERVICES INC.**



Principal Place of Business	Mailing Address
2700 SANDERS ROAD ATTN: TAX DEPARTMENT PROSPECT HEIGHTS, IL 60070 US	2700 SANDERS ROAD ATTN: TAX DEPARTMENT PROSPECT HEIGHTS, IL 60070 US



2. Principal Place of Business - No P.O. Box # 3. Mailing Address

Suite, Apt. #, etc.

**HSBC Finance Corporation**  
**Tax Department - 1 SW**  
**26525 N. Riverwoods Blvd.**  
**Mettawa, IL 60045** Country

Suite, Apt. #, etc.

**HSBC Finance Corporation**  
**Tax Department - 1 SW**  
**26525 N. Riverwoods Blvd.**  
**Mettawa, IL 60045** City

04212008 Chg-P CR2E034 (12/06)

4. FEI Number

51-0353172

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VPS ☐ Delete  
NAME ABRAMS, LORETTA R  
STREET ADDRESS 2700 SANDERS ROAD  
CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070

TITLE VPT ☐ Delete  
NAME ANDERSON, DANIEL W  
STREET ADDRESS 2700 SANDERS ROAD  
CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070

TITLE PD ☐ Delete  
NAME DETELICH, T. M.  
STREET ADDRESS 2700 SANDERS ROAD  
CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070

TITLE VPD ☐ Delete  
NAME MADISON, KATHYN  
STREET ADDRESS 2700 SANDERS ROAD  
CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070

TITLE EVPC ☒ Delete  
NAME GREENE, J.T.  
STREET ADDRESS 2700 SANDERS ROAD  
CITY-ST-ZIP PROSPECT HEIGHTS, IL 60070

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 26525 N. Riverwoods Blvd.  
CITY-ST-ZIP Mettawa, IL 60045

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 26525 N. Riverwoods Blvd.  
CITY-ST-ZIP Mettawa, IL 60045

TITLE PD ☐ Change ☐ Addition  
NAME C.R. Espanto  
STREET ADDRESS 26525 N. Riverwoods Blvd.  
CITY-ST-ZIP Mettawa, IL 60045

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 26525 N. Riverwoods Blvd.  
CITY-ST-ZIP Mettawa, IL 60045

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *gn*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*4/23/2008*

Date

*224-554-6405*

Daytime Phone #