2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2005
Secretary of State

DOCUMENT# F96000002912

Entity Name: EHOMECREDIT CORP.

Current Principal Place of Business:

211 STATION ROAD
MINEOLA, NY 11501

New Principal Place of Business:

ONE OLD COUNTRY RD.
SUITE 300
CARLE PLACE, NY 11514

Current Mailing Address:

211 STATION ROAD
MINEOLA, NY 11501

New Mailing Address:

ONE OLD COUNTRY RD.
SUITE 300
CARLE PLACE, NY 11514

FEI Number: 11-2815564 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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: S ( ) Delete
Name: TIMMINS, LAWRENCE
Address: 211 STATION ROAD
City-St-Zip: MINEOLA, NY 11501

Title: P ( ) Delete
Name: BODE, MICHAEL J
Address: 211 STATION ROAD
City-St-Zip: MINEOLA, NY 11501

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: BODE, MICHAEL J PRESIDE
Address: ONE OLD COUNTRY RD., SUITE 300
City-St-Zip: CARLE PLACE, NY 11514 US

Title: SECR (X) Change ( ) Addition
Name: KOTKIN, DAVID J SECRETA
Address: ONE OLD COUNTRY RD., SUITE 300
City-St-Zip: CARLE PLACE, NY 11514 US

Title: CEO ( ) Change (X) Addition
Name: ZEGARELLI, PHILIP CEO/CFO
Address: ONE OLD COUNTRY RD., SUITE 300
City-St-Zip: CARLE PLACE, NY 11514 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL J. BODE PRES 04/28/2005

Electronic Signature of Signing Officer or Director — Date