


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED

Feb 05 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
<b>DOCUMENT # F97000004116 (6)</b> 1. Corporation Name <b>NUVELL CREDIT CORPORATION</b>		

Principal Place of Business <b>17500 CHENAL LITTLE ROCK AR 72211</b>	Mailing Address <b>17500 CHENAL LITTLE ROCK AR 72211</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>21 17500 CHENAL PKWY.</b> Suite, Apt. #, etc.		2a. Mailing Address <b>26 17500 CHENAL PKWY.</b> Suite, Apt. #, etc.		3. Date Incorporated or Qualified <b>08/05/1997</b>	
22 City & State		27 City & State		4. FEI Number <b>72-1384803</b> Applied For <input type="checkbox"/> Not Applicable	
23 Zip		28 Zip		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24 Country		29 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
25		30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324</b>				10. Name and Address of New Registered Agent	
				81 Name	
				82 Street Address (P.O. Box Number is Not Acceptable)	
				83	
				84 City	
				85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	CD	<input type="checkbox"/> DELETE		1.1 TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	GIBSON, JOHN E			1.2 NAME	Timothy S. Sambrano		
STREET ADDRESS	3044 WEST GRAND BLVD.			1.3 STREET ADDRESS	17500 Chenal Pkwy		
CITY-ST-ZIP	DETROIT MI 48202			1.4 CITY-ST-ZIP	Little Rock, AR 72211		
TITLE	DP	<input checked="" type="checkbox"/> DELETE		2.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	FELDSTEIN, ERIC A			2.2 NAME	Dennis R. James		
STREET ADDRESS	3044 WEST GRAND BLVD.			2.3 STREET ADDRESS	17500 Chenal Pkwy		
CITY-ST-ZIP	DETROIT MI 48202			2.4 CITY-ST-ZIP	Little Rock AR 72211		
TITLE	DV	<input type="checkbox"/> DELETE		3.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MAEDER, WALTER			3.2 NAME	J. Robert Hardesty		
STREET ADDRESS	3044 WEST GRAND BLVD.			3.3 STREET ADDRESS	17500 Chenal Pkwy.		
CITY-ST-ZIP	DETROIT MI 48202			3.4 CITY-ST-ZIP	Little Rock, AR 72211		
TITLE	DV	<input type="checkbox"/> DELETE		4.1 TITLE	DVT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	VAN ORMAN, JEROME B JR.			4.2 NAME	Linda I. Voss		
STREET ADDRESS	3044 WEST GRAND BLVD.			4.3 STREET ADDRESS	17500 Chenal Pkwy.		
CITY-ST-ZIP	DETROIT MI 48202			4.4 CITY-ST-ZIP	Little Rock, AR 72211		
TITLE	T	<input checked="" type="checkbox"/> DELETE		5.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HAUSEMAN, SUSAN G			5.2 NAME	Daniel E. Staub		
STREET ADDRESS	3044 WEST GRAND BLVD.			5.3 STREET ADDRESS	17500 Chenal Pkwy		
CITY-ST-ZIP	DETROIT MI 48202			5.4 CITY-ST-ZIP	Little Rock, AR 72211		
TITLE	S	<input type="checkbox"/> DELETE		6.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	MERRYMAN, GREGORY K			6.2 NAME	Sylvia L. Borchert		
STREET ADDRESS	3031 WEST GRAND BLVD.			6.3 STREET ADDRESS	17500 Chenal Pkwy.		
CITY-ST-ZIP	DETROIT MI 48202			6.4 CITY-ST-ZIP	Little Rock, AR 72211		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sylvia Borchert* RSylvia Borchert 1-7-98 501-821-5200

CR2E034 (10/97)