

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006882

**FILED**  
**Feb 28, 2011**  
**Secretary of State**

**Entity Name:** ASSOCIATED CREDITORS EXCHANGE, INC.

**Current Principal Place of Business:**

3443 N. CENTRAL AVE.  
SUITE 1100  
PHOENIX, AZ 85012

**New Principal Place of Business:**

**Current Mailing Address:**

3443 N. CENTRAL AVE.  
SUITE 1100  
PHOENIX, AZ 85012

**New Mailing Address:**

**FEI Number:** 86-0634219

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
515 E. PARK AVENUE  
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

**OFFICERS AND DIRECTORS:**

Title: PCD  
Name: BERARDI, JOSEPH A  
Address: 3443 NORTH CENTRAL AVE SUITE 1100  
City-St-Zip: PHOENIX, AZ 85012

Title: ST  
Name: OLSON, CYNTHIA  
Address: 3443 NORTH CENTRAL AVE SUITE 1100  
City-St-Zip: PHOENIX, AZ 85012

Title: VP  
Name: BERARDI, MATTHEW J  
Address: 3443 NORTH CENTRAL AVE SUITE 1100  
City-St-Zip: PHOENIX, AZ 85012

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW J. BERARDI

V.P

02/28/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date