

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000810

FILED
Apr 18, 2005
Secretary of State

Entity Name: TOWN & COUNTRY CREDIT CORPORATION

Current Principal Place of Business:

2010 MAIN STREET
SUITE 800
IRVINE, CA 92614

New Principal Place of Business:

Current Mailing Address:

2010 MAIN STREET
SUITE 800
IRVINE, CA 92614

New Mailing Address:

FEI Number: 33-0749128 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR.
SUITE 4
WESTON, FL 33331 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: P () Delete
Name: UPTON, DANIEL C
Address: 2010 MAIN STREET, SUITE 800
City-St-Zip: IRVINE, CA 92614

Title: SD () Delete
Name: BASS, ADAM J
Address: 1100 TOWN & COUNTRY RD., 11TH FLOOR
City-St-Zip: ORANGE, CA 92868

Title: CD () Delete
Name: WALSH, JEFFREY A
Address: 1100 TOWN & COUNTRY RD, 11TH FLOOR
City-St-Zip: ORANGE, CA 92868

Title: T () Delete
Name: CHRISTENSEN, KAREN
Address: 1100 TOWN & COUNTRY RD, 11TH FLOOR
City-St-Zip: ORANGE, CA 92868

Title: EVCF () Delete
Name: BLACK, RONALD J
Address: 2010 MAIN STREET, SUITE 800
City-St-Zip: IRVINE, CA 92614

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

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:

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

Title: EVP () Change (X) Addition
Name: KEEN, JULE J
Address: 1100 TOWN & COUNTRY RD, 11TH FLOOR
City-St-Zip: ORANGE, CA 92868

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: DIANE E. TIBEREND

AS

04/18/2005

Electronic Signature of Signing Officer or Director

_____ Date