2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003609

Entity Name: CONSUMER AUTO REFINANCE SERVICES, INC.

FILED Apr 14, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
300 ST. PETERS CENTRE BLVD.				300 ST. PETERS CENTRE BLVD.		
200 SAINT PETERS, MO 63376				SUITE 200 SAINT PETERS, MO 63376		
Current Mailing Address:				New Mailing Address:		
300 ST. PETERS CENTRE BLVD.				300 ST. PETERS CENTRE BLVD.		
200 SAINT PETERS, MO 63376			SUITE 200 SAINT PETERS, MO 63376			
	El Number: 43-1810958 FEI Number Applied For()		FEI Number Not Applicable () Certificate of Status Desired ()			
Name and	Address of C	urrent Registered Agent:		Name and	Address of New Registered Agent:	
1333 NOR	RED AGENTS I TH DUVAL STI SSEE, FL 3230					
	named entity s e of Florida.	ubmits this statement for the po	urpose o	f changing i	ts registered office or registered agent, or both,	
SIGNATUR	RE:					
	Electroni	c Signature of Registered Age	nt		Date	
Election Car	mpaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	ANELLO, GARY	S CENTRE BLVD., STE 200		Title: Name: Address: City-St-Zip:	D (X) Change () Addition ANELLO, GARY M 556 RED BRIDGE ST. LOUIS, MO 63021	
Title: Name: Address: City-St-Zip:	DS () GAREA, JOSEP 9645 CLAYTON SAINT LOUIS, M	RD.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BARRY, MATTH	S CENTRE BLVD., STE 200		Title: Name: Address: City-St-Zip:	P (X) Change () Addition STEVEN, WIDEMAN M 300 ST. PETERS CENTRE BLVD., STE 200 SAINT PETERS, MO 63376	
Title: Name: Address: City-St-Zip:	D () RULL, STEVEN 9645 CLAYTON SAINT LOUIS, M	M RD.		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () ROBENSTEIN, F 222 SOUTH CEN CLAYTON, MO	ITRAL		Title: Name: Address: City-St-Zip:	D (X) Change () Addition RUBENSTEIN, RICHARD 222 SOUTH CENTRAL CLAYTON, MO 63105	

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: DENISE M KAY A 04/14/2005