

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J89255

FILED
Mar 15, 2004
Secretary of State

Entity Name: CENTRAL CREDIT SERVICES, INC.

Current Principal Place of Business:

9550 REGENCY SQUARE BLVD
#602
JACKSONVILLE, FL 32225 US

New Principal Place of Business:

Current Mailing Address:

9550 REGENCY SQUARE BLVD
#602
JACKSONVILLE, FL 32225 US

New Mailing Address:

FEI Number: 59-2834638 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLAGLE, SUSAN ESQ.
1201 SAN AMARO ROAD
JACKSONVILLE, FL 32207 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: DURANTE, PETER
Address: 2900 WESTBOROUGH DRIVE
City-St-Zip: SAINT CHARLES, MO 63301

Title: TS () Delete
Name: DURANTE, KAREN K
Address: 2900 WESTBOROUGH DRIVE
City-St-Zip: SAINT CHARLES, MO 63301

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DURANTE, PETER P
Address: 2900 WESTBOROUGH DRIVE
City-St-Zip: SAINT CHARLES, MO 63301

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

Title: D () Change (X) Addition
Name: DURANTE, PETER G
Address: 9550 REGENCY SQUARE BLVD, SUITE 602
City-St-Zip: JACKSONVILLE, FL 32225

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: PETER G. DURANTE

D

03/15/2004

Electronic Signature of Signing Officer or Director

Date