

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000003725

Entity Name: CREDIT SOLUTIONS LLC

FILED
Feb 27, 2007
Secretary of State

Current Principal Place of Business:

4785 58TH AVE N
SAINT PETERSBURG, FL 33714

New Principal Place of Business:

Current Mailing Address:

4785 58TH AVE N
SAINT PETERSBURG, FL 33714

New Mailing Address:

FEI Number: 20-2193274

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHALLEY, THOMAS H JR.
4785 58TH AVE N
SAINTPETERSBURG, FL 33714 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

MANAGING MEMBERS/MANAGERS:

Title: CEO () Delete
Name: WHALLEY, THOMAS H JR
Address: 4785 58TH AVE N
City-St-Zip: SAINTPETERSBURG, FL 33714

Title: PRES () Delete
Name: TAYLOR, DARINA
Address: 4785 58TH AVE N
City-St-Zip: SAINTPETERSBURG, FL 33714

Title: VP () Delete
Name: KLEM, SANDRA J
Address: 4785 58TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33714

ADDITIONS/CHANGES:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TOM WHALLEY

CEO

02/27/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date