

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Apr 14, 2009
Secretary of State**

DOCUMENT# L05000003725

Entity Name: CREDIT SOLUTIONS LLC

Current Principal Place of Business:

60 137TH AVE CIRCLE
MADEIRA BEACH, FL 33708

New Principal Place of Business:

Current Mailing Address:

60 137TH AVE CIRCLE
MADEIRA BEACH, FL 33708

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.
60 137TH AVE CIRCLE
MADEIRA BEACH, FL 33708 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: 60 137TH AVE CIRCLE
City-St-Zip: MADEIRA BEACH, FL 33708

Title: PRES () Delete
Name: KLEM, SANDRA J
Address: 60 137TH AVE CIRCLE
City-St-Zip: MADEIRA BEACH, FL 33708

ADDITIONS/CHANGES:

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 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

04/14/2009

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