2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0000000266

Entity Name: REGENCY CREDIT, L.L.C.

4246 E WOOD ST, STE 500

PHOENIX, AZ 85040

Address:

City-St-Zip:

FILED Apr 24, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
4246 E WO STE 500 PHOENIX,	OOD ST , AZ 85040			
Current Mailing Address:			New Mailing Address:	
4246 E WO STE 500 PHOENIX,	OOD ST , AZ 85040			
FEI Number	: 86-0832994	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	d Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
2775 SUN SUITE 100	MAN, STEVEN NY ISLES BLV) 331604007 L	/D		
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both
SIGNATU	RE:			
	Electro	nic Signature of Registered Age	ent	Date
MANAGING MEMBERS/MANAGERS:			ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGRM (SCHWARTZ, F 4246 E WOOL PHOENIX, AZ	ST, STE 500	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGRM (MONASHKIN, 4246 E WOOL PHOENIX, AZ	ST, STE 500	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	MGR (SCHWARTZ, A 4246 E WOOL PHOENIX, AZ	ST, STE 500	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name:	,) Delete AMMER, LESLEY	Title: Name:	() Change () Addition

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.

Address:

City-St-Zip:

SIGNATURE: SHELDON MONASHKIN MGRM 04/24/2006