2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M97000000855

FILED Apr 22, 2008 Secretary of State

Entity Name: CREDIT-BASED ASSET SERVICING AND SECURITIZATION LLC

Current Principal Place of Business: New Principal Place of Business: 335 MADISON AVENUE, 19TH FLOOR NEW YORK, NY 10017 **Current Mailing Address: New Mailing Address:** 335 MADISON AVENUE, 19TH FLOOR NEW YORK, NY 10017 FEI Number: 13-3897606 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US 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: ADDITIONS/CHANGES: Title: MGR () Delete (X) Change () Addition CASALE, MARK CURRAN, CHRIS Name: Name: 1601 MARKET STREET Address: 1601 MARKET STREET Address: City-St-Zip: PHILADELPHIA, PA 19103 City-St-Zip: PHILADELPHIA, PA 19103 Title: MGR (X) Delete Title: () Change () Addition QUINT, C. ROBERT Name: Name: Address: 1601 MARKET STREET Address: City-St-Zip: PHILADELPHIA, PA 19103 City-St-Zip: MGR Title: MGR () Delete Title: (X) Change () Addition SINKS, PATRICK VERHOEVEN, BERNHARD Name: Name: 270 E. KILBOURNE AVENUE Address: Address: 270 E. KILBOURNE AVENUE City-St-Zip: MILWAUKEE, WI 53202 City-St-Zip: MILWAUKEE, WI 53202 Title: MGR (X) Delete Title: () Change () Addition LANE, JEFF Name: Name: 270 E KILBOURNE AVENUE Address: Address: City-St-Zip: MILWAUKEE, WI 53202 City-St-Zip: Title: MGR () Delete Title: () Change () Addition WILLIAMS, BRUCE J Name: Name: 335 MADISON AVENUE, 19TH FLOOR Address: Address: NEW YORK, NY 10017 City-St-Zip: 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: SHARI KUSHNER EVP 04/22/2008