

**2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 29, 2007**  
**Secretary of State**

DOCUMENT# N01000005397

**Entity Name:** NATIONWIDE CONSUMER CREDIT SERVICES, INC.**Current Principal Place of Business:**5460 N STATE ROAD 7  
SUITE 229  
FT LAUDERDALE, FL 33319**New Principal Place of Business:****Current Mailing Address:**5460 N STATE ROAD 7  
SUITE 229  
FT LAUDERDALE, FL 33319**New Mailing Address:****FEI Number:** 31-1789647**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**FORSTEIN, MARK  
5460 N STATE ROAD 7  
SUITE 224  
FT LAUDERDALE, FL 33160 US**Name and Address of New Registered Agent:**WYLIE, JERMIAH  
5460 N STATE ROAD 7  
SUITE 224  
FT LAUDERDALE, FL 33160 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: JERMIAH WYLIE

10/29/2007

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PRES ( ) Delete  
**Name:** BORWICK, KEVIN  
**Address:** 5460 N STATE ROAD 7  
**City-St-Zip:** FT LAUDERDALE, FL 33319**Title:** VP (X) Delete  
**Name:** FORSTEIN, MARK  
**Address:** 5460 N STATE RD.7  
**City-St-Zip:** FT. LAUDERDALE,, FL 33319**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DIR (X) Change ( ) Addition  
**Name:** WYLIE, JERMIAH  
**Address:** 5460 N STATE ROAD 7  
**City-St-Zip:** FT LAUDERDALE, FL 33319**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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JERMIAH WYLIE

DIR

10/29/2007

Electronic Signature of Signing Officer or Director

Date