

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000008641

FILED
Apr 29, 2011
Secretary of State

Entity Name: NATIONAL ASSOCIATION OF RESPONSIBLE CREDIT REPAIR ADVISORS, INC.

Current Principal Place of Business:

6619 STATE RD 54
NEW PORT RICHEY, FL 34653

New Principal Place of Business:

Current Mailing Address:

6619 STATE RD 54
NEW PORT RICHEY, FL 34653

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CITRON, MICHAEL
6619 STATE RD 54
NEW PORT RICHEY, FL 34653 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

OFFICERS AND DIRECTORS:

Title: D
Name: CITRON, MICHAEL
Address: 6619 STATE RD 54
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: PERKINS, DONNA
Address: 6619 STATE RD 54
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: KAPLAN, JASON
Address: 6619 STATE RD 54
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: D
Name: PATE, JOEL
Address: 6619 STATE RD 54
City-St-Zip: NEW PORT RICHEY, FL 34653

I hereby 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 all other like empowered.

SIGNATURE: MICHAEL CITRON

D

04/29/2011

Electronic Signature of Signing Officer or Director

Date