


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 19, 2008 8:00 am**  
**Secretary of State**

02-19-2008 90020 010 \*\*\*\*61.25

<b>DOCUMENT # N44587</b>	
1. Entity Name <b>NORTH AMERICAN CONSUMER CREDIT SERVICE CORPORATION</b>	

Principal Place of Business <b>1761 WEST HILLSBORO BLVD. #402 DEERFIELD BCH., FL 33442</b>	Mailing Address <b>1761 WEST HILLSBORO BLVD. #402 DEERFIELD BCH., FL 33442</b>
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2. Principal Place of Business - No P.O. Box # <b>9910 N.W. 58TH COURT</b>	3. Mailing Address <b>9910 N.W. 58TH COURT</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <b>PARKLAND, FL</b>	City & State <b>PARKLAND, FL</b>
Zip <b>33076</b>	Zip <b>33076</b>
Country <b>USA</b>	Country <b>USA</b>

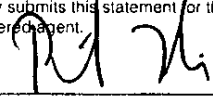


02042008 Chg-NP CR2E037 (12/06)

4. FEI Number <b>65-0275992</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent <b>NIX, GEORGE REID 1761 WEST HILLSBORO BLVD. #402 DEERFIELD, FL 33442</b>	7. Name and Address of New Registered Agent Name <b>GEORGE REID NIX</b> Street Address (P.O. Box Number is Not Acceptable) <b>9910 N.W. 58TH COURT</b> City <b>PARKLAND</b> FL Zip Code <b>33076</b>
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8. 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. I am familiar with, and accept the obligations of registered agent.

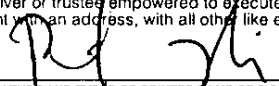
SIGNATURE:  DATE: **2-14-07**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>Filing Fee is \$61.25 Due by May 1, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to <b>Florida Department of State</b>
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D NIX, GEORGE R. 1761 W. HILLSBORO BLVD DEERFIELD, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D GEORGE REID NIX 9910 N.W. 58TH COURT PARKLAND, FL 33076 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JARKE, MICHAEL 1601 N. PALM AVE PEMBROKE PINES, FL 33026 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WINOGRAD, CRAIG 21074 BLACKMAPLE BOCA RATON, FL 33428 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ABZUG, MARK 2801 UNIVERSITY DR. CORAL SPRINGS, FL 33065 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE: **2-14-07**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR