

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000037158

FILED
Mar 24, 2009
Secretary of State

Entity Name: BANKERS CREDIT CORPORATION

Current Principal Place of Business:

1053 MAITLAND CENTER COMMONS BLVD
SUITE 200
MAITLAND, FL 32751

New Principal Place of Business:

Current Mailing Address:

1053 MAITLAND CENTER COMMONS BLVD
SUITE 200
MAITLAND, FL 32751

New Mailing Address:

FEI Number: 20-0034150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, EMMETT J
107 AMBERWOOD DRIVE
LONGWOOD, FL 32779 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FOSTER, EMMETT J
Address: 107 AMBERWOOD DRIVE
City-St-Zip: LONGWOOD, FL 32779

Title: D () Delete
Name: KOSNOSKI, ROBERT L
Address: 870 N. SANDBRANCH ROAD
City-St-Zip: MT. HOPE, WV 258808903

Title: P () Delete
Name: HIGHTOWER, L. CLEVELAND
Address: 1154 WESTERN WAY
City-St-Zip: ORLANDO, FL 32804

Title: S () Delete
Name: FOSTER, JAN
Address: 107 AMBERWOOD DRIVE
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: L. CLEVELAND HIGHTOWER

PRES

03/24/2009

Electronic Signature of Signing Officer or Director

Date