2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059226

Entity Name: LENDING CENTRAL INC.

FILED Apr 01, 2008 Secretary of State

Current P	rincipal Place	of Business:	New Principal Plac	New Principal Place of Business:		
1600 S.OC #803	CEAN BLVD.		1600 S.OCEAN BL\ #803	VD.		
	D BEACH, FL 3	3062	POMPANO BEACH	H, FL 33062 US		
Current M	lailing Address	s:	New Mailing Addre	New Mailing Address:		
	CEAN BLVD		1600 S. OCEAN BL	.VD		
#803 POMPANO	D BEACH, FL 3	3062	#803 POMPANO BEACH	H, FL 33062 US		
FEI Number	: 90-0085339	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ((X)	
Name and	Address of C	urrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:		
1600 S. O	STUART CEC CEAN BLVD. D BEACH, FL 3					
	e named entity s e of Florida.	ubmits this statement for the p	purpose of changing its registe	ered office or registered agent, or	both,	
SIGNATUI	RE:					
	Electroni	c Signature of Registered Ag	ent	Date		
Election Car	mpaign Financing	Trust Fund Contribution (X).				
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	CEO () SCHNUR, STUAI 1600 S. OCEAN POMPANO BEAG	BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	PRES () SCHNUR, STUAI 1600 S. OCEAN POMPANO BEAG	BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	SEC () SCHNUR, DENIS 1600 S. OCEAN POMPANO BEA	BLVD 803	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	TRE ()	Delete SE R TRE	Title: Name:	() Change () Addition		

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.

Address:

City-St-Zip:

SIGNATURE: STUART SCHNUR CEO 04/01/2008

1600 S. OCEAN BLVD #803

POMPANO BEACH, FL 33062

Address:

City-St-Zip: