

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000156767

FILED  
Jan 15, 2008  
Secretary of State

Entity Name: NATIONWIDE WHOLESALE LENDING CORP.

## Current Principal Place of Business:

351 SOUTH CYPRESS ROAD  
115  
POMPANO BCH, FL 33060

## New Principal Place of Business:

## Current Mailing Address:

351 SOUTH CYPRESS ROAD  
POMPANO BCH, FL 33060

## New Mailing Address:

351 SOUTH CYPRESS ROAD  
115  
POMPANO BCH, FL 33060

FEI Number: 87-0734871

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

TENDLER, JASON M  
351 SOUTH CYPRESS ROAD  
115  
POMPANO BCH, FL 33060 US

## Name and Address of New Registered Agent:

TENDLER, JASON M  
351 SOUTH CYPRESS ROAD  
115  
POMPANO BCH, FL 33060 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: JASON M TENDLER

01/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: DOWNS, MICHAEL B  
Address: 351 SOUTH CYPRESS ROAD  
City-St-Zip: POMPANO BCH, FL 33060

Title: VP ( ) Delete  
Name: TENDLER, JASON M  
Address: 351 SOUTH CYPRESS ROAD  
City-St-Zip: POMPANO BEACH, FL 33060

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: DOWNS, MICHAEL B  
Address: 351 SOUTH CYPRESS ROAD, STE 115  
City-St-Zip: POMPANO BCH, FL 33060

Title: VP (X) Change ( ) Addition  
Name: TENDLER, JASON M  
Address: 351 SOUTH CYPRESS ROAD, STE 115  
City-St-Zip: POMPANO BEACH, FL 33060

Title: SEC ( ) Change (X) Addition  
Name: FRANK, MICHELE  
Address: 351 SOUTH CYPRESS RD, STE 115  
City-St-Zip: POMPANO BEACH, FL 33060

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: MICHAEL B DOWNS

PRES

01/15/2008

Electronic Signature of Signing Officer or Director

Date