2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000080795

Entity Name: FIRST BOSTON CREDIT, INC

12421 NORTH FLORIDA AVE

TAMPA, FL 33612 US

Address:

City-St-Zip:

FILED May 07, 2007 Secretary of State

,			,				
Current Principal Place of Business:				New Princ	New Principal Place of Business:		
	RTH FLORIC	A AVE					
STE 212 TAMPA, F	L 33612 l	JS					
Current M	lailing Addr	ess:		New Maili	ng Addres	ss:	
	RTH FLORID)A AVE					
STE 212 TAMPA, F	L 33612 l	JS					
FEI Number:	: 38-3745106	FEI Number Ap	oplied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:		
#112	, LINDA THGREEN A L 33624 US						
	named entity e of Florida.	y submits this sta	tement for the p	urpose of changing i	ts registere	ed office or registered agent, or both,	
SIGNATU	RE:						
	Electro	onic Signature of	Registered Age	ent		Date	
		193(2)(b), F.S., the o	•	t receive the prior notic	e.		
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR		
Title: Name: Address: City-St-Zip:	BRIDGES, CI	H FLORIDA AVE		Title: Name: Address: City-St-Zip:		() Change() Addition	
Title: Name: Address: City-St-Zip:	MCCRAY, AL	H FLORIDA AVE ST	E 212	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	ROBISON, LI	H FLORIDA AVE ST	E 212	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name:	S (LONG. SHAR	() Delete EE		Title: Name:	S ROGERS.	(X) Change()Addition BRITTANY	

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: ALVIN MCCRAY PRES 05/07/2007

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