

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000128049

Entity Name: THE CREDIT REPAIR SHOP, INC.

FILED
Feb 15, 2007
Secretary of State

Current Principal Place of Business:

6728 STRAWBERRY LANE
JACKSONVILLE, FL 32211

New Principal Place of Business:

1365 CASSAT AVE
JACKSONVILLE, FL 32205

Current Mailing Address:

6728 STRAWBERRY LANE
JACKSONVILLE, FL 32211

New Mailing Address:

FEI Number: 20-3477342 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DEMAGGIO, NANCY E
6728 STRAWBERRY LANE
JACKSONVILLE, FL 32211 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: P () Delete
Name: DEMAGGIO, NANCY
Address: 6728 STRAWBERRY LANE
City-St-Zip: JACKSONVILLE, FL 32211

Title: VP () Delete
Name: MASSEY, SUSAN
Address: 6007 NW COUNTY ROAD 125
City-St-Zip: LAWTEY, FL 32058

Title: T () Delete
Name: DEMAGGIO, NANCY
Address: 6728 STRAWBERRY LANE
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: DEMAGGIO, NANCY
Address: 6728 STRAWBERRY LANE
City-St-Zip: JACKSONVILLE, FL 32211

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

I hereby certify that the information supplied with this filing does not qualify for the 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: NANCY DEMAGGIO

P

02/15/2007

Electronic Signature of Signing Officer or Director

Date