

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000067331

FILED  
Jun 05, 2007  
Secretary of State

Entity Name: NATION WIDE CONSUMER DEBT RELIEF, INC.

## Current Principal Place of Business:

7500 NW 1ST COURT  
APT. 205  
PLANTATION, FL 33317

## New Principal Place of Business:

6950 CYPRESS ROAD  
SUITE 210  
PLANTATION, FL 33317

## Current Mailing Address:

7500 NW 1ST COURT  
APT. 205  
PLANTATION, FL 33317

## New Mailing Address:

6950 CYPRESS ROAD  
SUITE 210  
PLANTATION, FL 33317

FEI Number: 42-1705350

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WEBBER, BARRY S  
4430 SW 64TH AVENUE  
DAVIE, FL 33314 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: BLACKMON, BOBBY  
Address: 7500 NW 1ST COURT  
City-St-Zip: PLANTATION, FL 33317 US

Title: SCTY ( ) Delete  
Name: BLACKMON, BOBBY  
Address: 7500 NW 1ST COURT  
City-St-Zip: PLANTATION, FL 33317 US

Title: TRS ( ) Delete  
Name: BLACKMON, BOBBY  
Address: 7500 NW 1ST COURT  
City-St-Zip: PLANTATION, FL 33317

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: BLACKMON, BOBBY  
Address: 6950 CYPRESS ROAD, SUITE 210  
City-St-Zip: PLANTATION, FL 33317 US

Title: SCTY (X) Change ( ) Addition  
Name: BLACKMON, BOBBY  
Address: 6950 CYPRESS ROAD, SUITE 210  
City-St-Zip: PLANTATION, FL 33317 US

Title: TRS (X) Change ( ) Addition  
Name: BLACKMON, BOBBY  
Address: 6950 CYPRESS ROAD, SUITE 210  
City-St-Zip: PLANTATION, FL 33317

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: BOBBY BLACKMON

P

06/05/2007

Electronic Signature of Signing Officer or Director

Date