2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000128464

Entity Name: NATIONWIDE LENDING SOLUTIONS USA INC

FILED Mar 12, 2008 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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10045 COVE LAKE DR 6700 CONROY WINDERMERE RD ORLANDO, FL 32836

STE 220

ORLANDO, FL 32835

Current Mailing Address: New Mailing Address:

10045 COVE LAKE DR 7637 POINTE VENEZIA DR ORLANDO, FL 32836 ORLANDO, FL 32836

FEI Number: 26-0808549 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAHAMONDE, STEVEN BAHAMONDE, STEVEN 10045 COVE LAKE DR 7637 POINTE VENEZIA DR ORLANDO, FL 32836 US ORLANDO, FL 32836

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: STEVEN BAHAMONDE 03/12/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BAHAMONDE, STEVEN BAHAMONDE, STEVEN Name: Name: Address:

10045 COVE LAKE DR 7637 POINTE VENEZIA DR Address: City-St-Zip: ORLANDO, FL 32836 City-St-Zip: ORLANDO, FL 32836

Title: Title: (X) Change () Addition () Delete BAHAMONDE, STEVEN BAHAMONDE, STEVEN Name: Name:

10045 COVE LAKE DR 7637 POINTE VENEZIA DR Address: Address: ORLANDO, FL 32836 ORLANDO, FL 32836 City-St-Zip: City-St-Zip:

Title: Title: DVPT () Delete () Change () Addition

BETANCOURT, DANIEL Name: Name: 8098 WELLSMERE CIR Address: Address: City-St-Zip: ORLANDO, FL 32835 City-St-Zip:

Title: DS (X) Delete Title: () Change () Addition

PLASENCIA, DAVID Name: Name: Address: 9421 RAVEN DELL STREET Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip:

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: STEVEN BAHAMONDE CEO 03/12/2008