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Feb 06 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P13858 (6)
1. Corporation Name
CSC CREDIT SERVICES, INC.



Principal Place of Business
C/O TAX DEPT.
2100 E. GRAND AVENUE
EL SEGUNDO CA 90245

Mailing Address
C/O TAX DEPT.
2100 E. GRAND AVENUE
EL SEGUNDO CA 90245-5024

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/31/1987		3a. Date of Last Report 01/31/1996	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		4. FEI Number 74-1560395		Applied For Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORPORATION SYSTEM, INC
1201 HAYES ST
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ELAM, DALE B. <input checked="" type="checkbox"/> DELETE	1.1 TITLE	P Robert M. Denny <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	652 E. NORTH BELT	1.2 NAME	652 North Belt East
STREET ADDRESS	HOUSTON TX	1.3 STREET ADDRESS	Houston, TX 77060
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	S GORE, RONALD G <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	652 E. N. BELT	2.2 NAME	
STREET ADDRESS	HOUSTON TX 77060	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	V CARMICHAEL, DWIGHT L <input type="checkbox"/> DELETE	3.1 TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	652 E. N. BELT	3.2 NAME	
STREET ADDRESS	HOUSTON TX 77060	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	AT GOODMAN, LARRY D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2100 E. GRAND AVE.	4.2 NAME	
STREET ADDRESS	EL SEGUNDO CA 90245	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	VAS LEVEL, LEON J. <input type="checkbox"/> DELETE	5.1 TITLE	VPTASD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	2100 E. GRAND AVE.	5.2 NAME	
STREET ADDRESS	EL SEGUNDO CA	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	D Van B. Honeycutt <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	2100 E. Grand Ave.
STREET ADDRESS		6.3 STREET ADDRESS	El Segundo, CA 90245
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Larry D. Goodman (310) 615-0311
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Larry D. Goodman/Asst. Tres. 01-24-97
Date Daytime Phone #

CR2E034 (9/96)

CSC CREDIT SERVICES, INC.
LIST OF ADDITIONAL OFFICERS & DIRECTORS

OFFICERS:

Denis M. Crane AT
2100 E. Grand Ave., El Segundo, CA 90245

R. Nelson Beckham VP
652 North Belt East, Houston, TX 77060

Peggy Fisher ATAS
652 North Belt East, Houston, TX 77060

Hayward D. Fisk VPAS
2100 E. Grand Ave., El Segundo, CA 90245

Thomas R. Irvin AT
2100 E. Grand Ave., El Segundo, CA 90245

DIRECTORS:

William R. Hoover D
2100 E. Grand Ave., El Segundo, CA 90245