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May 10, 1999 8:00 am
Secretary of State

05-10-1999 90128 019 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P13858

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

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/31/1987	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 74-1560395	Applied For <input type="checkbox"/> 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 owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	FL	85

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	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DENNY, ROBERT M.	1.2 NAME	
STREET ADDRESS	652 NORTH BELT EAST	1.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX	1.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GORE, RONALD G	2.2 NAME	
STREET ADDRESS	652 E. N. BELT	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOUSTON TX 77060	2.4 CITY-ST-ZIP	
TITLE	V <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Vice president <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARMICHAEL, DWIGHT L	3.2 NAME	Peggy Fisher
STREET ADDRESS	652 E. N. BELT	3.3 STREET ADDRESS	2100 E. Grand Ave.
CITY-ST-ZIP	HOUSTON TX 77060	3.4 CITY-ST-ZIP	El Segundo, CA 90245
TITLE	AT <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GOODMAN, LARRY D	4.2 NAME	
STREET ADDRESS	2100 E. GRAND AVE.	4.3 STREET ADDRESS	
CITY-ST-ZIP	EL SEGUNDO CA 90245	4.4 CITY-ST-ZIP	
TITLE	VAS <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEVEL, LEON J.	5.2 NAME	
STREET ADDRESS	2100 E. GRAND AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	EL SEGUNDO CA	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 as an attachment with an address, with all other like empowered.

SIGNATURE: Larry D. Goodman DATE: 3/29/99 DAYTIME PHONE #: (310) 615-0311

CR2E034 (11/98)

CORPORATE DATA SHEET
CSC CREDIT SERVICES, INC. (TEXAS)

ID# 74-1560395
ADDRESS: 652 North Belt East, Suite 400, Houston TX 77060

P13858

53220190128.19

PRINCIPAL BUSINESS: Consumer Credit Reporting

OFFICERS:

Robert M. Denny	President
Peggy J. Fisher	VP Finance & Admin., Asst. Treas., Asst. Sec.
Hayward D. Fisk	Vice President & Assistant Secretary
Leon J. Level	Vice President, Treasurer, & Assistant Secretary
Larry D. Goodman	Assistant Treasurer
Thomas R. Irvin	Assistant Treasurer
Scott M. Delanty	Assistant Treasurer
Ronald G. Gore	Secretary
Stephen E. Johnson	Assistant Secretary

DIRECTORS:

Robert M. Denny	2100 E. Grand Ave. El Segundo, CA 90245
Van B. Honeycutt	2100 E. Grand Ave. El Segundo, CA 90245
Leon J. Level	2100 E. Grand Ave. El Segundo, CA 90245
Hayward D. Fisk	2100 E. Grand Ave. El Segundo, CA 90245