

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P36724 (3)

1. Corporation Name

CREDITWATCH, INC.



Principal Place of Business

2201 N. COLLINS, SUITE 300
ARLINGTON TX 76011

Mailing Address

2201 N. COLLINS, SUITE 300
ARLINGTON TX 76011

2. Principal Place of Business

2a. Mailing Address

21 1200 E. Copeland Rd.

26 1200 E. Copeland Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 400

27 400

City & State

City & State

23 Arlington, TX

28 Arlington, TX

Zip

Zip

Country

24 76011

29 76011

25 Tarrant

30 Tarrant

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
12/18/1991

3a. Date of Last Report
06/26/1995

4. FEI Number

75-2316063

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

SHAY, KEVIN E
1975 E. SUNRISE BLVD., SUITE 520
FT. LAUDERDALE FL 33304

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

Signature, typed or printed name of registered agent and s. 1, applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME QUANT, HAROLD E.
STREET ADDRESS 2201 N. COLLINS, #300
CITY-ST-ZIP ARLINGTON TX

TITLE VP ☒ DELETE

NAME BLEVINS, TERRI
STREET ADDRESS 2201 N. COLLINS, #300
CITY-ST-ZIP ARLINGTON TX

TITLE ST ☐ DELETE

NAME WERELE, ANNEGRET
STREET ADDRESS 2201 N. COLLINS, #300
CITY-ST-ZIP ARLINGTON TX

TITLE D ☐ DELETE

NAME QUANT, MICHELLE
STREET ADDRESS 1719 BURLESON - RETTA RD.
CITY-ST-ZIP BURLESON TX

TITLE VP ☐ DELETE

NAME NEFF, KYRA
STREET ADDRESS 2201 N. COLLINS, SUITE 300
CITY-ST-ZIP ARLINGTON TX

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1200 E. Copeland Rd., Suite 400

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

1 ☒ Change ☐ Addition

Werle, Annegret
1200 E. Copeland Rd., Suite 400

2 ☒ Change ☐ Addition

1200 E. Copeland Rd., Suite 400

3 ☒ Change ☐ Addition

1200 E. Copeland Rd., Suite 400

4 ☐ Change ☒ Addition

S
Patrick Lavery
1200 E. Copeland Rd., Suite 400
Arlington, TX 76011

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 any attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96 (817) 860-7888
Date Daytime Phone #

CR2E034 (12/95)