

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000058998

FILED
Feb 23, 2009
Secretary of State

Entity Name: KENDALL CREDIT AND BUSINESS SERVICE, INC.

Current Principal Place of Business:

8500 SW 117 RD
5TH FL
MIAMI, FL 33183 US

New Principal Place of Business:

Current Mailing Address:

6855 RED RD #600
CORAL GABLES, FL 33143 US

New Mailing Address:

6855 RED ROAD
SUITE 500
CORAL GABLES, FL 33143 US

FEI Number: 65-0434778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRIEDMAN, DAVID R
6855 RED RD #600
CORAL GABLES, FL 33143 US

Name and Address of New Registered Agent:

FRIEDMAN, DAVID R
6855 RED ROAD
SUITE 600
CORAL GABLES, FL 33143 US

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:

02/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: KEELEY, BRIAN E
Address: 6855 RED ROAD SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

Title: V () Delete
Name: GREENLEAF, WENDY
Address: 6855 RED ROAD SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

Title: VP () Delete
Name: GODFREY, KAREN
Address: 6855 RED ROAD SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

Title: ST () Delete
Name: LAWSON, RALPH E
Address: 6855 RED ROAD SUITE 600
City-St-Zip: CORAL GABLES, FL 33143

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: KAREN GODFREY

VP

02/23/2009

Electronic Signature of Signing Officer or Director

Date