

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000058998

FILED  
Feb 03, 2012  
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 ROAD  
SUITE 500  
CORAL GABLES, FL 33143 US

**New Mailing Address:**

**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 ROAD  
SUITE 500  
CORAL GABLES, FL 33143 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: KAREN GODFREY

VP

02/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date