## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000019860

725 PALMER WAY

MELBOURNE, FL 32940

Address: City-St-Zip:

Entity Name: STUDENTCREDIT.COM, INC.

**FILED** Mar 21, 2005 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 850 CROSS LAKE DR 5223 OUTLOOK DR. MELBOURNE, FL 32901 MELBOURNE, FL 32940 **Current Mailing Address: New Mailing Address:** 850 CROSS LAKE DR. 5223 OUTLOOK DR MELBOURNE, FL 32901 MELBOURNE, FL 32940 FEI Number: 65-0897103 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: GENTILE, RUSSELL P GENTILE, RUSSELL P 850 CROSS LAKE DR. 5223 OUTLOOK DR. MERRITT ISLAND, FL 32901 US MERRITT ISLAND, FL 32940 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: 03/21/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition OGDEN, DAVID Name: Name: 725 PALMER WAY Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition GENTILE, RUSSELL P Name: Name: GENTILE. RUSSELL P 850 CROSS LAKE DR. 5223 OUTLOOK DR. Address: Address: MELBOURNE, FL 32901 MELBOURNE, FL 32940 City-St-Zip: City-St-Zip: ( ) Delete Title: Title: () Change () Addition OGDEN, MYRON Name: Name:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

Address:

City-St-Zip:

VΡ SIGNATURE: RUSSELL GENTILE 03/21/2005