

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S94223

FILED
Mar 09, 2004
Secretary of State

Entity Name: TRANSCREDIT, INC.

Current Principal Place of Business:

101 CENTURY 21 DR.
STE. 107
JACKSONVILLE, FL 32216 US

Current Mailing Address:

101 CENTURY 21 DR.
STE. 107
JACKSONVILLE, FL 32216 US

FEI Number: 59-3100141

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

9485 REGENCY SQ BLVD
STE. 102
JACKSONVILLE, FL 32225 US

New Mailing Address:

9485 REGENCY SQ BLVD
STE. 102
JACKSONVILLE, FL 32225 US

Name and Address of Current Registered Agent:

WINSTON, ASTON H
101 CENTURY 21 DRIVE
STE 107
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

WINSTON, ASTON H
9485 REGENCY SQ BLVD
STE 102
JACKSONVILLE, FL 32225 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: WINSTON ASTON

03/09/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ASTON, H. WINSTON
Address: 13125 FT CAROLINE ROAD
City-St-Zip: JACKSONVILLE, FL 32225

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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.

SIGNATURE: WINSTON ASTON

P

03/09/2004

Electronic Signature of Signing Officer or Director

Date