

1.) CORPORATION NAME:

MERRILL LYNCH CREDIT CORPORATION

DUE DATE: **2/28/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

SCC ID NO: **F0424491**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 401 N TRYON ST
NC1-021-02-20

CITY/ST/ZIP: CHARLOTTE, NC 28255-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: LAWRENCE P WASHINGTON OFFICER DIRECTOR
 TITLE: PRESIDENT
 ADDRESS: 401 N TRYON ST
 NC1-021-02-20
 CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-

NAME: DONNA DESOUZA OFFICER DIRECTOR
 TITLE: VICE PRESIDENT
 ADDRESS: 401 N TRYON ST
 NC1-021-02-20
 CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-

NAME: ARON LEVINE OFFICER DIRECTOR
 TITLE: DIRECTOR
 ADDRESS: 401 N TRYON ST
 NC1-021-02-20
 CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-

NAME: ARPAD DOBRANSKI OFFICER DIRECTOR
 TITLE: CFO/T/VP
 ADDRESS: 401 N TRYON ST
 NC1-021-02-20
 CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-

NAME: HOLLY MRUZ TITLE: SECRETARY ADDRESS: 401 N TRYON ST NC1-021-02-20 CITY/ST/ZIP/CO: CHARLOTTE, NC 28255-	<input checked="checked" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ DONNA DESOUZA</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DONNA DESOUZA, VICE <u>PRESIDENT</u> PRINTED NAME AND CORPORATE TITLE	<u>1/24/2011</u> DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.