No. **C 132875**	**Due no later than Mar 31, 2012**	2. Registered Agent and Address **(NO PO BOX)**
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 **NO FILING FEE IF RECEIVED BY DUE DATE**	**Annual Report Form** **1. Mailing Address: Correct in this box if needed.** NATIONAL ASSOCIATION OF CREDIT MANAGEMENT-OREGON, INC. (THE) LISA J ROGSTAD 7931 NE HALSEY STE 200 PORTLAND OR 97213	CHARLES W FAWCETT 515 S 6TH ST BOISE ID 83701 3. New Registered Agent Signature:*

4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).

Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	PAT SWOPE	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	LOI JONES	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	PAULA COOLEY	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	TONY CENIGA	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	WILL CAMPBELL	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	LINDA BISHOP	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	STEVEN AMIEL	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	SUE HEIN	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	KIMI SHELTON	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
DIRECTOR	RAEANN BINAU	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
TREASURER	MARSHA JOHNSON	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
SECRETARY	JOHN HARDY	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213
PRESIDENT	RODNEY B WHEELAND	7931 NE HALSEY STE 200	PORTLAND	OR	USA	97213

5. Organized Under the Laws of:	6. Annual Report must be signed.*	
OR **C 132875**	Signature: Lisa Rogstad	Date: 01/13/2012
	Name (type or print): Lisa Rogstad	Title: Executive Assistant

Processed 01/13/2012

* Electronically provided signatures are accepted as original signatures.