

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000032836

FILED
Jan 17, 2009
Secretary of State

Entity Name: CHRISTIAN DEBT CONSOLIDATORS, LLC

Current Principal Place of Business:

201 SE 15TH TERRACE
SUITE 206
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

201 SE 15TH TERRACE
SUITE 206
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

FEI Number: 52-2422112 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MCCONNELL, CHARLES
516 NW 54TH ST
BOCA RATON, FL 33487 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: UPBIN, DANIEL
Address: 5135 DEERHURST CRESCENT CIRCLE
City-St-Zip: BOCA RATON, FL 33486 US

Title: MGRM () Delete
Name: MCCONNELL, CHARLES II
Address: 516 NW 54TH ST
City-St-Zip: BOCA RATON, FL 33487 US

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL UPBIN

MM

01/17/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date