

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000004429

FILED
Apr 25, 2006
Secretary of State

Entity Name: COMMUNITY COUNSELLING SERVICE CO., LLC

Current Principal Place of Business:

461 FIFTH AVENUE
NEW YORK, NY 10017

New Principal Place of Business:

Current Mailing Address:

461 FIFTH AVENUE
NEW YORK, NY 10017

New Mailing Address:

FEI Number: 13-2837520 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: MGR () Delete
Name: STRICKLAND, WILLIAM J
Address: 461 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: MGR () Delete
Name: HANRAHAN, WILLIAM B
Address: 461 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: MGR () Delete
Name: KISSANE, ROBERT
Address: 461 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: MGR () Delete
Name: MOUGHAN, PATRICK W
Address: 461 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: MGR () Delete
Name: DOHERTY, COLM
Address: 461 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10017

Title: MGR (X) Delete
Name: CROWLEY, MAURICE
Address: 461 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10017

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: JOSEPH, LEE
Address: 461 FIFTH AVENUE
City-St-Zip: NEW YORK, NY 10017

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

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

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

Title: MGR (X) Change () Addition
Name: GERUN, MICHAEL
Address: 3349 HWY 138, BLDG C, STE D
City-St-Zip: WALL, NJ 07719

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 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: MICHAEL GERUN

MGR

04/25/2006

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