

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000003530

FILED
Feb 25, 2003
Secretary of State

Entity Name: ASSURED CREDIT COUNSELING, INC.

Current Principal Place of Business:

3773 N.W. 126 AVE
#3
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

3773 N.W. 126 AVE
#3
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 65-1112302 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PLATTER, WILLIAM
7040 W. PALMETTO PARK RD
#4 -255
BOCA RATON, FL 33433 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SPIEWAK, ROBERT
Address: 4690 NORTH UNIVERSITY DRIVE #313
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Delete
Name: PLATTER, WILLIAM
Address: 4690 NORTH UNIVERSITY DRIVE #313
City-St-Zip: CORAL SPRINGS, FL 33065

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DV (X) Change () Addition
Name: SPIEWAK, ROBERT
Address: 4690 NORTH UNIVERSITY DRIVE #313
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DP (X) Change () Addition
Name: PLATTER, WILLIAM
Address: 4690 NORTH UNIVERSITY DRIVE #313
City-St-Zip: CORAL SPRINGS, FL 33065

Title: D () Change (X) Addition
Name: DAWKINS, JEFFREY
Address: 8150 SW 3RD CT
City-St-Zip: NORTH LAUDERDALE, FL 33068

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM L PLATTER

PRES

02/25/2003

Electronic Signature of Signing Officer or Director

Date