# DOCUMENT# M05000004429

# Entity Name: COMMUNITY COUNSELLING SERVICE CO., LLC

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

## **Current Principal Place of Business:**

527 MADISON AVENUE, 5TH FLOOR NEW YORK, NY 10022

#### **Current Mailing Address:**

527 MADISON AVENUE, 5TH FLOOR NEW YORK, NY 10022 US

# FEI Number: 90-0286107

#### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS ST TALLAHASSEE, FL 32301 US

Certificate of Status Desired: No

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

## Authorized Person(s) Detail :

Title	MANAGING MEMBER	Title	MANAGING MEMBER
Name	MICHAUD, CHARLES	Name	LOONEY, CHRISTOPHER
Address	527 MADISON AVENUE, 5TH FLOOR	Address	100 SPECTRUM CENTER DRIVE SUITE 1210
City-State-Zip:	NEW YORK NY 10022	City-State-Zip:	IRVINE CA 92618
Title	MANAGING MEMBER	Title	MANAGING MEMBER
Name	JAVIER, ERIC	Name	HAPPY, FREDERIC
Address	527 MADISON AVENUE, 5TH FLOOR	Address	100 MONTGOMERY STREET SUITE
City-State-Zip:	NEW YORK NY 10022	0.11.01.1.1.7.1	
Title	MANAGING MEMBER	City-State-Zip:	SAN FRANCISCO CA 94104
Name	KANE, JONATHAN	Title	MANAGING MEMBER
Address	527 MADISON AVENUE, 5TH FLOOR	Name	HOSKOW, PETER
City-State-Zip:	NEW YORK NY 10022	Address	155 NORTH WACKER SUITE 1790
		City-State-Zip:	CHICAGO IL 60606
Title	MANAGING MEMBER	Title	MANAGING MEMBER
Name	HAPPY, RAYMOND		
Address	527 MADISON AVENUE, 5TH FLOOR	Name	KISSANE, ROBERT
City-State-Zip:	NEW YORK NY 10022	Address	527 MADISON AVENUE, 5TH FLOOR
		City-State-Zip:	NEW YORK NY 10022

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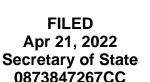
I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JONATHAN KANE

MANAGING MEMBER

Date

Electronic Signature of Signing Authorized Person(s) Detail



Date

04/21/2022

# Authorized Person(s) Detail Continued :

Title	MANAGING MEMBER	Title	MANAGING MEMBER
Name	RICE, ROBERT	Name	KISSANE, THOMAS
Address	100 EAST PRATT STREET SUITE 2118	Address	527 MADISON AVENUE, 5TH FLOOR
City-State-Zip:	BALTIMORE MD 21202	City-State-Zip:	NEW YORK NY 10022