

**2014 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000003258

**FILED**  
**Apr 07, 2014**  
**Secretary of State**  
**CC4272203774**

**Entity Name:** CONSUMER CREDIT COUNSELING SERVICE OF THE  
MIDWEST, INC.

**Current Principal Place of Business:**

4500 EAST BROAD ST.  
COLUMBUS, OH 43213

**Current Mailing Address:**

4500 EAST BROAD ST.  
COLUMBUS, OH 43213

**FEI Number: 31-0731111**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title PCEO  
Name KAPPAS, MICHAEL  
Address 9935 OSPREY  
City-State-Zip: THORNVILLE OH 43076

Title CST  
Name KALLAY, CHRISTOPHER  
Address 5252 ST ANDREWS DR  
City-State-Zip: WESTERVILLE OH 43082

Title V  
Name CANTRELL, JOHNNY  
Address 131 SHINNECOCK HILLS DR  
City-State-Zip: GEORGETOWN KY 43024

*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 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 all other like empowered.*

SIGNATURE: CHRISTOPHER J. KALLAY

VP/CFO, SEC-TREAS

04/07/2014

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date