

**2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000000094

**FILED**  
**Feb 05, 2015**  
**Secretary of State**  
**CC6066661221**

**Entity Name:** ADVISORY CREDIT MANAGEMENT, INC

**Current Principal Place of Business:**

3511 WEST COMMERCIAL BLVD  
SUITE 404  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

3511 WEST COMMERCIAL BLVD  
SUITE 404  
FORT LAUDERDALE, FL 33309 US

**FEI Number:** 22-3799942

**Certificate of Status Desired:** No

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

KELLY, WILLIAM  
3511 WEST COMMERCIAL BLVD  
SUITE 404  
TAMARAC, FL 33309 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:** WILLIAM KELLY

02/05/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name VASTARDIS, TOM  
Address 3511 WEST COMMERCIAL BLVD  
404  
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR  
Name NEEDLE, JEFFREY  
Address 5310 NW 33RD AVE, SUITE 101  
City-State-Zip: FORT LAUDERDALE FL 33309

Title TREASURER, SECRETARY,  
DIRECTOR  
Name BIENKOWSKI, LEIGH  
Address 3511 WEST COMMERCIAL BLVD  
SUITE 404  
City-State-Zip: FORT LAUDERDALE FL 33309

Title EXECUTIVE DIRECTOR  
Name KELLY, WILLIAM  
Address 3511 WEST COMMERCIAL BLVD  
SUITE 404  
City-State-Zip: FORT LAUDERDALE FL 33309

*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:** WILLIAM KELLY

**PRESIDENT**

02/05/2015

Electronic Signature of Signing Officer/Director Detail

Date