

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000007254

FILED
Apr 13, 2006
Secretary of State

Entity Name: GEORGIA ASSOCIATION OF CREDIT MANAGEMENT, INC.

Current Principal Place of Business:

3700 CRESTWOOD PKWY SUITE 1060
DULUTH, GA 30096

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 29429
ATLANTA, GA 30359

New Mailing Address:

FEI Number: 58-0145150

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FELDER, BENJAMIN ESQ.
C/O KASS, SHULER, ET AL
1505 NORTH FLORIDA AVE.
TAMPA, FL 33601 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: P () Delete
Name: RYAN, MICHAEL P
Address: 3700 CRESTWOOD PKWY SUITE 1060
City-St-Zip: DULUTH, GA 30096

Title: CHAR () Delete
Name: SIMONE, JOANNE
Address: 3700 CRESTWOOD PKWY SUITE 1060
City-St-Zip: DULUTH, GA 30096

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: RYAN, MICHAEL P
Address: 3700 CRESTWOOD PKWY SUITE 1060
City-St-Zip: DULUTH, GA 30096

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 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: MICHAEL RYAN

PRES

04/13/2006

Electronic Signature of Signing Officer or Director

Date