

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000003258

FILED
Jan 08, 2008
Secretary of State

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

Current Principal Place of Business:

4500 EAST BROAD ST.
COLUMBUS, OH 43213

New Principal Place of Business:

Current Mailing Address:

4500 EAST BROAD ST.
COLUMBUS, OH 43213

New Mailing Address:

FEI Number: 31-0731111

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZUNZUNEGUI, JOSEPH
4491 SOUTH STATE RD. 7
DAVIE, FL 33314 US

Name and Address of New Registered Agent:

ZEIER, JAMES H
4491 SOUTH STATE RD. 7
DAVIE, FL 33314 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: JAMES H. ZEIER

01/08/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCEO () Delete
Name: KAPPAS, MICHAEL
Address: 9935 OSPREY
City-St-Zip: THORNVILLE, OH 43076

Title: EVP () Delete
Name: SEATON, JAY
Address: 608 TREESIDE LANE
City-St-Zip: AVON LAKE, OH 44012

Title: CST () Delete
Name: ZEIER, JAMES
Address: 960 S. ROOSEVELT AVE
City-St-Zip: BEXLEY, OH 43209

Title: V () Delete
Name: CALL, RICHARD L
Address: 1215 DOBBINS
City-St-Zip: NEW ALBANY, OH 43054

Title: V () Delete
Name: CANTRELL, JOHNNY
Address: 131 SHINNECOCK HILLS DR
City-St-Zip: GEORGETOWN, KY 40324

Title: V () Delete
Name: STALER, WILLIAM
Address: 1366 WHITE OAK LANE
City-St-Zip: NEW ALBANY, OH 43054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JAMES H ZEIER

CST

01/08/2008

Electronic Signature of Signing Officer or Director

Date