## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000003515

City-St-Zip:

DOWNEY, CA 90242

Entity Name: CONSUMER CREDIT CONSULTANTS, INC.

FILED Feb 12, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
8280 FLORENCE AVE SUITE #100 STE 210 DOWNEY, CA 90240				8280 FLORENCE AVE SUITE #210 STE 210 DOWNEY, CA 90240			
Current Mailing Address:				New Mailing Address:			
8280 FLORENCE AVE SUITE #100 STE 210 DOWNEY, CA 90240				8280 FLORENCE AVE SUITE #210 STE 210 DOWNEY, CA 90240			
FEI Number	: 91-1865681	FEI Number Applied For ( )	FEI Numbe	er Not Appl	icable ( )	Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	N	ame and	Address of N	lew Registered Agent:	
ORANGE The above	e of Florida.	300 073 US submits this statement for the	purpose of c	hanging it	ts registered o	office or registered agent, or bo	
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTO			
Title: Name: Address: City-St-Zip:	PD ( GOMEZ, JOSE 8509 VILLAVEI WHITTER, CA	RADE	Na Ad	tle: ame: ddress: ity-St-Zip:	( )	) Change ()Addition	
Title: Name: Address: City-St-Zip:	VS ( VERA, MARIA 9925 HILDRET SOUTH GATE,		Na Ad	tle: ame: ddress: ity-St-Zip:	T (X HINOSTROZA, 8415 BORSON DOWNEY, CA	ST	
Title: Name: Address: City-St-Zip:	T ( HINOSTROZA, 8415 BORSON DOWNY, CA 9	ST	Na Ad	tle: ame: ddress: ity-St-Zip:	C (X ESTRADA, MAI 5281 MCCOME BUENA PARK,	BER RD	
Title: Name: Address: City-St-Zip:	C ( ESTRADA, MA 5281 MCCOME BUENA PARK,	BER RD	Na Ad	tle: ame: ddress: ity-St-Zip:	VC (X HERRERA, AR 8429 DONOVAI DOWNEY, CA	N ST	
Title: Name: Address:	VC (X HERRERA, AR 8429 DONOVA		Na	tle: ame:	( )	) Change ()Addition	

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.

City-St-Zip:

SIGNATURE: JOSEPH A. GOMEZ PRES 02/12/2009