

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Nov 04, 2011**  
**Secretary of State**

DOCUMENT# F05000005775

**Entity Name:** CONSUMER AND BUSINESS DEBT COUNSELING SERVICES INCORPORATED**Current Principal Place of Business:**401 CENTER POINTE CIRCLE, STE. 1503  
ALTAMONTE SPRINGS, FL 32701**New Principal Place of Business:****Current Mailing Address:**401 CENTER POINTE CIRCLE, STE. 1503  
ALTAMONTE SPRINGS, FL 32701**New Mailing Address:****FEI Number:** 04-3327439**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BOBBE, ISAAC  
3759 KINSLEY PLACE  
WINTER PARK, FL 32792 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: CP  
Name: BOBBE, ISAAC  
Address: 3759 KINSLEY PLACE  
City-St-Zip: WINTER PARK, FL 32792 US

Title: V  
Name: ROBERTS, RAY  
Address: 3455 JUJUBE DRIVE  
City-St-Zip: ORLANDO, FL 32810

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: ISAAC BOBBE

CP

11/04/2011

Electronic Signature of Signing Officer or Director

Date