2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 17, 2009
Secretary of State

DOCUMENT# F06000005824

Entity Name: CRICKET DEBT COUNSELING INC.

Current Principal Place of Business:

10121 SE SUNNYSIDE ROAD
SUITE 300
CLACKAMAS, OR 97015

New Principal Place of Business:

Current Mailing Address:

10121 SE SUNNYSIDE ROAD
SUITE 300
CLACKAMAS, OR 97015

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331 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:	DIRE	( ) Delete
Name:	TRIBE, DEBI L	
Address:	P.O. BOX 403	
City-St-Zip:	CORBETT, OR 97019	
Title:	PRES	( ) Delete
Name:	PETSHOW, JOHN	
Address:	10121 SE SUNNYSIDE RD. #300	
City-St-Zip:	CLACKAMAS, OR 97015	
Title:	DIRE	( ) Delete
Name:	COX, DANIEL	
Address:	1450 VILLAGE ST.	
City-St-Zip:	FAIRVIEW, OR 97024	
Title:	SEC	( ) Delete
Name:	BEBER, GREG	
Address:	1719 SE 38TH AVNUE	
City-St-Zip:	PORTLAND, OR 97214	
Title:	DIRE	( ) Delete
Name:	OLSON, JEFF	
Address:	4500 KRUSE WAY #100	
City-St-Zip:	LAKE OSWEGO, OR 97035	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	DIRE	(X) Change ( ) Addition
Name:	COX, DANIEL	
Address:	2365 SE TROUTDALE RD.	
City-St-Zip:	TROUTDALE, OR 97060	
Title:	SEC	(X) Change ( ) Addition
Name:	BEBER, GREG	
Address:	1719 SE 38TH AVENUE	
City-St-Zip:	PORTLAND, OR 97214	
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: JOHN PETSHOW PRES 06/17/2009

Electronic Signature of Signing Officer or Director — Date