

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007435

FILED
Apr 25, 2007
Secretary of State

Entity Name: CONSOLIDEBT CREDIT COUNSELING SERVICES, INC.

Current Principal Place of Business:

3350 N.W. 53RD STREET
SUITE 101
FT LAUDERDALE, FL 33309 US

New Principal Place of Business:

Current Mailing Address:

3350 N.W. 53RD STREET
SUITE 101
FT LAUDERDALE, FL 33309 US

New Mailing Address:

FEI Number: 65-1054361 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HESS & KENNEDY, LLC
210 N UNIVERSITY DRIVE
SUITE 209
CORAL SPRINGS, FL 33071 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: D () Delete
Name: MCCARTHY, JILL S
Address: 3350 NW 53RD STREET SUITE 101
City-St-Zip: FT. LAUDERDALE, FL 33309 US

Title: D () Delete
Name: COLLINS, KEVIN
Address: 3350 NW 53RD STREET SUITE 101
City-St-Zip: FT. LAUDERDALE, FL 33309

Title: D () Delete
Name: UNSWORTH, KENNETH
Address: 3350 NW 53RD STREET SUITE 101
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D () Delete
Name: MICHAELS, SHERRY
Address: 3350 NW 53RD STREET SUITE 101
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: () Delete
Name:
Address:
City-St-Zip:

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
Name:
Address:
City-St-Zip:

Title: D () Change (X) Addition
Name: UNSWORTH, HEATHER
Address: 3350 NW 53RD STREET SUITE 101
City-St-Zip: FORT LAUDERDALE, FL 33309

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: JILL MCCARTHY

DIR

04/25/2007

Electronic Signature of Signing Officer or Director

Date