

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000007892

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: JDS CREDIT COUNSELING TRUST, INC.

Current Principal Place of Business:

950 NORTH FEDERAL HIGHWAY SUITE 107
POMPANO BEACH, FL 33062

New Principal Place of Business:

950 NORTH FEDERAL HIGHWAY
SUITE 107
POMPANO BEACH, FL 33062

Current Mailing Address:

950 NORTH FEDERAL HIGHWAY SUITE 107
POMPANO BEACH, FL 33062

New Mailing Address:

950 NORTH FEDERAL HIGHWAY
SUITE 107
POMPANO BEACH, FL 33062

FEI Number: 65-1150852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUEL, LORRAINE M
950 NORTH FEDERAL HIGHWAY SUITE 107
POMPANO BEACH, FL 33062

Name and Address of New Registered Agent:

RUEL, LORRAINE M
950 NORTH FEDERAL HIGHWAY
SUITE 107
POMPANO BEACH, FL 33062

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:

04/30/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RUEL, LORRAINE M
Address: 950 NORTH FEDERAL HIGHWAY SUITE 107
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: YOUNG, JASON A
Address: PO BOX 592
City-St-Zip: MANCHESTER CENTER, VT 33062

Title: D () Delete
Name: ZALLMAN, CAROLE L
Address: 800 CORAL RIDGE DR #103
City-St-Zip: CORAL SPRINGS, FL 33071

Title: D () Delete
Name: GENG, PATRICIA A
Address: 421 SE 5TH STREET
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: INCARDONA, GIOVANNI
Address: 890 N FEDERAL HWY
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: RUEL, LORRAINE M
Address: 950 NORTH FEDERAL HIGHWAY SUITE 107
City-St-Zip: POMPANO BEACH, FL 33062

Title: VD (X) Change () Addition
Name: CICCARELLI, ANNA
Address: 6430 LESLIE STREET
City-St-Zip: JUPITER, FL 33458

Title: STD (X) Change () Addition
Name: INCARDONA, GIOVANNI
Address: 1701 E ATLANTIC BLVD
City-St-Zip: POMPANO BEACH, FL 33060

Title: D (X) Change () Addition
Name: CARILLO, ROBERTO
Address: 15840 STATE ROAD 50, LOT 119
City-St-Zip: CLERMONT, FL 34711

Title: D (X) Change () Addition
Name: MOHLER, JUDITH
Address: 3380 NW 21ST AVE
City-St-Zip: FORT LAUDERDALE, FL 33309

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LORRAINE M. RUEL

PD

04/30/2002

Electronic Signature of Signing Officer or Director

Date