2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005623

Entity Name: CREDIT COUNSELING, INC.

FILED Jan 29, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

10774 WILES RD

CORAL SPRINGS, FL 33305

Current Mailing Address: New Mailing Address:

10774 WILES RD

CORAL SPRINGS, FL 33305

FEI Number: 14-1839282 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SILVERBERG, ALAN
12323 ST SIMONE DR
SILVERBERG, ALAN
12323 ST SIMON DR

BOCA RATON, FL 33428 US BOCA RATON, FL 33428 US

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: ALAN SILVERBERG 01/29/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 SILVERBERG, ALAN
 Name:
 SILVERBERG, ALAN

 Address:
 12323 ST SIMONE DR
 Address:
 12323 ST SIMON DR

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 BOCA RATON, FL 33428

 Name:
 SILVERBERG, RANDY
 Name:
 SILVERBERG, RANDY

 Address:
 12323 ST SIMONE DR
 Address:
 12323 ST SIMON DR

 City-St-Zip:
 BOCA RATON, FL 33428
 City-St-Zip:
 BOCA RATON, FL 33428

Title: D () Delete Title: () Change () Addition

 Name:
 MILLER, MARSHA
 Name:

 Address:
 9900 SUNRISE LAKES BLVD APT 211, BLDG 153
 Address:

 City-St-Zip:
 SUNRISE, FL 33322
 City-St-Zip:

Title: V () Delete Title: () Change () Addition

 Name:
 SILVERBERG, RANDY
 Name:

 Address:
 10774 WILES RD
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33305
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: ALAN SILVERBERG PD 01/29/2007