

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005623

FILED
Jan 17, 2008
Secretary of State

Entity Name: CREDIT COUNSELING, INC.

Current Principal Place of Business:

14051 NW 14TH ST
SUNRISE, FL 33323

New Principal Place of Business:

Current Mailing Address:

14051 NW 14TH ST
SUNRISE, FL 33323

New Mailing Address:

FEI Number: 14-1839282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SILVERBERG, ALAN
12323 ST SIMON DR
BOCA RATON, FL 33428 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: PD () Delete
Name: SILVERBERG, ALAN
Address: 12323 ST SIMON DR
City-St-Zip: BOCA RATON, FL 33428

Title: T () Delete
Name: SILVERBERG, RANDY
Address: 12323 ST SIMON DR
City-St-Zip: BOCA RATON, FL 33428

Title: D () Delete
Name: MILLER, MARSHA
Address: 9900 SUNRISE LAKES BLVD APT 211, BLDG 153
City-St-Zip: SUNRISE, FL 33322

Title: V () Delete
Name: SILVERBERG, RANDY
Address: 10774 WILES RD
City-St-Zip: CORAL SPRINGS, FL 33305

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: V (X) Change () Addition
Name: SILVERBERG, RANDY
Address: 12323 ST SIMON DR
City-St-Zip: BOCA RATON, FL 33428

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: ALAN SILVERBERG

PD

01/17/2008

Electronic Signature of Signing Officer or Director

Date