

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007978

FILED
Apr 01, 2005
Secretary of State

Entity Name: FIDELITY CREDIT COUNSELING, INC.

Current Principal Place of Business:

2758 W. ATLANTIC BLVD., #30
POMPANO BEACH, FL 33069

New Principal Place of Business:

Current Mailing Address:

2758 W. ATLANTIC BLVD., #30
POMPANO BEACH, FL 33069

New Mailing Address:

FEI Number: 02-0672544

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHWARTZ, COREY
2758 W. ATLANTIC BLVD. #30
POMPANO BEACH, FL 33069 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: SCHWARTZ, COREY
Address: 2881 N OAKLAND FOREST DR, APT 201
City-St-Zip: FT LAUDERDALE, FL 33309

Title: DT (X) Delete
Name: FRANCAVIGLLA, JOSEPHINE
Address: 2705 NE 32 AVE
City-St-Zip: FT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHWARTZ, COREY
Address: 2758 WEST ATLANTIC BLVD SUITE 30
City-St-Zip: POMPAÑO BEACH, FL 33069

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: COREY SCHWARTZ

PD

04/01/2005

Electronic Signature of Signing Officer or Director

Date