

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008683

FILED  
Apr 22, 2004  
Secretary of State

**Entity Name:** CONSUMER CREDIT EDUCATION CORPORATION

**Current Principal Place of Business:**

2477 STICKNEY POINT RD., STE. 221B  
SARASOTA, FL 34231

**New Principal Place of Business:**

**Current Mailing Address:**

2477 STICKNEY POINT RD., STE. 221B  
SARASOTA, FL 34231

**New Mailing Address:**

**FEI Number:** 74-3071238

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ENGLISH, WILLIAM A  
2477 STICKNEY POINT RD., STE. 221B  
SARASOTA, FL 34231

**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: SPEAR, DANA W  
Address: 67 RIVER STREET  
City-St-Zip: NORWELL, MA 02061

Title: SD ( ) Delete  
Name: ENGLISH, WILLIAM A  
Address: 5430 EXUMA PL  
City-St-Zip: SARASOTA, FL 34233

Title: TD (X) Delete  
Name: FEWSTER, PHILIP  
Address: 4045 RIVIERA DRIVE  
City-St-Zip: SAN DIEGO, CA 92109

**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:

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: WILLIAM A. ENGLISH

SD

04/22/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date