2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2002 8:00 am
Secretary of State
02-03-2002 90013 009 ****61.25

DOCUMENT # N36391

1. Entity Name
CHRISTIAN CREDIT COUNSELORS, INC.

Principal Place of Business	Mailing Address
450 SEMINOLA BLVD CASSELBERRY FL 32707	851 SO COAST HWY 101 ENCINIAS CA 92024

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
	5838 EDISON PLACE
Suite, Apt. #, etc.	Suite, Apt. #, etc. SUITE 200
City & State	City & State CARLSBAD CA
Zip / Country	Zip / Country 92008 USA

4. FEI Number 59-2991517 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MCTAGGART, EDWARD J 2821 ROUDABOUT LANE ORLANDO FL 32818	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCTAGGART, EDWARD J. 2821 ROUNDABOUT LANE ORLANDO FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCTAGGART, SONIA J. 2821 ROUNDABOUT LANE ORLANDO FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUBENSTEIN, LAVERNE 1287 PRINCE COURT HEATHROW FL 32746	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOLT, EDWIN 679 CRICKLEWOOD TERRACE HEATHROW FL 32746	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUBENSTEIN STUART 1287 PRINCE CT HEATHROW FL 32746	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUBENSTEIN, STUART 1287 PRINCE CT HEATHROW, FL 32746	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1-11-02 (760)602-6428
SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #