

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36391

FILED
Apr 24, 2007
Secretary of State

Entity Name: CHRISTIAN CREDIT COUNSELORS, INC.

Current Principal Place of Business:

8475 SO. EASTERN AVENUE
102
LAS VEGAS, NV 89123

New Principal Place of Business:

Current Mailing Address:

8475 SO. EASTERN AVENUE
102
LAS VEGAS, NV 89123

New Mailing Address:

FEI Number: 59-2991517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCTAGGART, SONIA J
2821 ROUDABOUT LANE
ORLANDO, FL 32818 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: D () Delete
Name: HARSARAN, BARRY
Address: 644 LINN STREET
City-St-Zip: CINCINNATI, OH 45203

Title: D () Delete
Name: MCTAGGART, SONIA J.
Address: 2821 ROUNDABOUT LANE
City-St-Zip: ORLANDO, FL 32818

Title: D () Delete
Name: RUBENSTEIN, LAVERNE
Address: 1287 PRINCE COURT
City-St-Zip: HEATHROW, FL 32746

Title: PD () Delete
Name: RUBENSTEIN, STUART
Address: 1287 PRINCE CT
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: LENZ, HERBERT J
Address: 589 SABAL LAKE DR
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: O (X) Change () Addition
Name: MCTAGGART, SONIA J.
Address: 2821 ROUNDABOUT LANE
City-St-Zip: ORLANDO, FL 32818

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

Title: PD (X) Change () Addition
Name: RUBENSTEIN, STUART
Address: 1287 PRINCE CT
City-St-Zip: HEATHROW, FL 32746

Title: D (X) Change () Addition
Name: LENZ, HERBERT J
Address: 5354 LINDELL ROAD
City-St-Zip: LAS VEGAS, NV 89118

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: SONIA J MCTAGGART

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04/24/2007

Electronic Signature of Signing Officer or Director

Date