

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000003218

1. Entity Name

DEBT MANAGEMENT CREDIT COUNSELING CORP.

Principal Place of Business

700 BANYAN TRAIL
SUITE 200
BOCA RATON FL 33431

Mailing Address

23123 STATE ROAD 7 STE. 340
BOCA RATON FL 33428

2. Principal Place of Business

3. Mailing Address

700 BANYAN TRAIL

Suite, Apt. #, etc.

Suite 200

City & State

BOCA RATON FL

Zip

33431

Country

USA

City & State

Zip

Country

City

State

Zip Code

City

State

Zip Code

City

State

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FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90194 014 ****61.25



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0923483

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

CANTY, BONNIE L.
700 BANYAN TRAIL
SUITE 200
BOCA RATON FL 33431

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 D
NAME LANE, JAMES
STREET ADDRESS 4004 N.W. 62ND COURT
CITY-ST-ZIP COCONUT CREEK FL 33073

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME BYRNSIDE, RICHARD
STREET ADDRESS 4004 N.W. 62ND COURT
CITY-ST-ZIP COCONUT CREEK FL 33073

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DP
NAME PELLEGRINO, KAREN
STREET ADDRESS 1013 GREEN PINE BLVD.
CITY-ST-ZIP WEST PALM BEACH FL 33409

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVP
NAME WALTER, FATHER CHARLES
STREET ADDRESS 2205 S CONGRESS BEND DRIVE # 804
CITY-ST-ZIP POMPANO BEACH FL 33069

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DS
NAME BREININ, IRWIN
STREET ADDRESS 250 S.E. MIZNER BLVD, #501
CITY-ST-ZIP BOCA RATON FL 33432

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DT
NAME DEUTSCH, GERALD
STREET ADDRESS 700 BANYAN TRAIL, SUITE 200
CITY-ST-ZIP BOCA RATON FL 33431

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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: KAREN PELLEGRINO KAREN PELLEGRINO 3-8-02 561-981-0132

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)