

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000003218

**FILED**  
**Jul 01, 2004**  
**Secretary of State****Entity Name:** DEBT MANAGEMENT CREDIT COUNSELING CORP.**Current Principal Place of Business:**700 BANYAN TRAIL  
SUITE 200  
BOCA RATON, FL 33431**New Principal Place of Business:**700 BANYAN TRAIL  
SUITE 300  
BOCA RATON, FL 33431**Current Mailing Address:**700 BANYAN TRAIL  
SUITE 200  
BOCA RATON, FL 33431**New Mailing Address:**700 BANYAN TRAIL  
SUITE 300  
BOCA RATON, FL 33431**FEI Number:** 65-0923483**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ULLMAN, MICHAEL  
150 E PALMETTO PARK RD  
STE 650  
BOCA RATON, FL 33432 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: DS ( ) Delete  
Name: LANE, JAMES  
Address: 4004 N.W. 62ND COURT  
City-St-Zip: COCONUT CREEK, FL 33073

Title: DT ( ) Delete  
Name: RUDMAN, ALEXANDRA  
Address: 1230 SPANISH RIVER RD  
City-St-Zip: BOCA RATON, FL 33432

Title: DP ( ) Delete  
Name: WALTER, CHARLES  
Address: 2205 S CONGRESS BEND DRIVE # 804  
City-St-Zip: POMPANO BEACH, FL 33069

Title: D ( ) Delete  
Name: LOCONTE, MICHAEL  
Address: 1114 GREENPINE BLVD #102  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: DT ( ) Delete  
Name: JARVIS, WAYNE J  
Address: 777 JEFFERY ST#402  
City-St-Zip: BOCA RATON, FL 33487

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DST (X) Change ( ) Addition  
Name: LANE, JAMES  
Address: 4004 N.W. 62ND COURT  
City-St-Zip: COCONUT CREEK, FL 33073

Title: DVP (X) Change ( ) Addition  
Name: PELLIGRINO, KAREN  
Address: 1013 GREEN PINE BLVD  
City-St-Zip: WEST PALM BEACH, FL 33409

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: CHARLES WALTER

DP

07/01/2004

Electronic Signature of Signing Officer or Director

Date