

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003218

FILED
Apr 28, 2008
Secretary of State

Entity Name: DEBT MANAGEMENT CREDIT COUNSELING CORP.

Current Principal Place of Business:

700 W. HILLSBORO BLVD
BLDG. 1 SUITE 105
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

700 W. HILLSBORO BLVD
BLDG. 1 SUITE 105
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

FEI Number: 65-0923483 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTY, BONNIE L ESQ
700 W. HILLSBORO BLVD
BLDG. 1 SUITE 105
DEERFIELD BEACH, FL 33441 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: DST () Delete
Name: LANE, JAMES
Address: 4022 RIDGEVIEW LANE
City-St-Zip: HURRICANE, WV 25526

Title: DVP () Delete
Name: PELLIGRINO, KAREN
Address: 3033 MARBELLA COURT
City-St-Zip: WEST PALM BEACH, FL 33409

Title: DP () Delete
Name: WALTER, CHARLES
Address: 3095 N. COURSE DRIVE, #1002
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: JARVIS, WAYNE
Address: 777 JEFFREY STREET, APT 402
City-St-Zip: BOCA RATON, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DT (X) Change () Addition
Name: LANE, JAMES
Address: 4022 RIDGEVIEW LANE
City-St-Zip: HURRICANE, WV 25526 US

Title: DVP (X) Change () Addition
Name: PELLIGRINO, KAREN
Address: 3033 MARBELLA COURT
City-St-Zip: WEST PALM BEACH, FL 33409 US

Title: DP (X) Change () Addition
Name: WALTER, CHARLES
Address: 3095 N. COURSE DRIVE, #1002
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: D/S (X) Change () Addition
Name: CANTY, BONNIE
Address: 10606 CYPRESS BEND DRIVE
City-St-Zip: BOCA RATON, FL 33498 US

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: BONNIE L. CANTY

D/S

04/28/2008

Electronic Signature of Signing Officer or Director

Date