

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000064716

FILED
Jan 07, 2002
Secretary of State

Entity Name: CONSUMER CREDIT CONSULTANTS, INC.

Current Principal Place of Business:

1052 E. SEMORAN BLVD.
CASSELBERRY, FL 32707

New Principal Place of Business:

Current Mailing Address:

888 BENTLEY GREEN CIRCLE
WINTER SPRINGS, FL 32708

New Mailing Address:

FEI Number: 59-3090294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOFFMAN, STEVEN
1052 E. SEMORAN BLVD.
CASSELBERRY, FL 32707

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

Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOFFMAN, STEVEN
Address: 1850 LEE ROAD STE 228
City-St-Zip: WINTER PARK, FL 32789

Title: PST () Delete
Name: HOFFMAN, STEVEN
Address: 1850 LEE ROAD STE 228
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STEVEN HOFFMAN

PRES

01/07/2002

Electronic Signature of Signing Officer or Director

Date