

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000059304

FILED
May 01, 2009
Secretary of State

Entity Name: NATIONAL ASSOCIATION OF CERTIFIED CREDIT COUNSELORS OF FCN INC.

Current Principal Place of Business:

205 SIXTH AVENUE
INDIALANTIC, FL 32903

New Principal Place of Business:

Current Mailing Address:

205 SIXTH AVENUE
INDIALANTIC, FL 32903

New Mailing Address:

FEI Number: 20-1418677

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

AIELLO, HEATHER C
322 3RD AVENUE
INDIALANTIC, FL 32903 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: AIELLO, HEATHER C
Address: 322 3RD AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
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Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P,D (X) Change () Addition
Name: AIELLO, HEATHER C
Address: 322 3RD AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Change (X) Addition
Name: LYMAN IV, ARTHUR R LT. COL
Address: 6188 GEORGETOWN ROAD
City-St-Zip: BROAD RUN, VA 20137

Title: D () Change (X) Addition
Name: PETRILLO, KATHY
Address: 328 LEEWARD DRIVE
City-St-Zip: JUPITER, FL 34997

Title: D () Change (X) Addition
Name: MCELHINNEY, LESLIE
Address: 105 SOUTH RIVERSIDE DRIVE #154
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Change (X) Addition
Name: EVANS, AMANDA PHD.
Address: 209 SIXTH AVENUE
City-St-Zip: INDIALANTIC, FL 32903

Title: D () Change (X) Addition
Name: BAILEY, JOANIE
Address: 209 SIXTH AVENUE
City-St-Zip: INDIALANTIC, FL 32903

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

SIGNATURE: HEATHER C. AIELLO

P,D

05/01/2009

Electronic Signature of Signing Officer or Director

Date