

2022 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000001857

Entity Name: INCHARGE DEBT SOLUTIONS, INC.

FILED
Apr 19, 2022
Secretary of State
4682986132CC

Current Principal Place of Business:

5750 MAJOR BLVD.
SUITE 300
ORLANDO, FL 32819

Current Mailing Address:

5750 MAJOR BLVD.
SUITE 300
ORLANDO, FL 32819 US

FEI Number: 33-0770440

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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

Officer/Director Detail :

Title TREASURER, SECRETARY
Name MALSEED, WILLIAM
Address 5750 MAJOR BLVD
 SUITE 300
City-State-Zip: ORLANDO FL 32819

Title PRESIDENT, CEO
Name MONEY, ETTA
Address 5750 MAJOR BLVD.
 SUITE 300
City-State-Zip: ORLANDO FL 32819

Title TRUSTEE
Name SOLES, KRISTEN
Address 8000 TOWERS CRESCENT DR
 SUITE 1000
City-State-Zip: TYSONS CORNER VA 22182

Title TRUSTEE
Name TARBELL, CAREY
Address 1615 L STREET NW
 SUITE 1110
City-State-Zip: WASHINGTON DC 20036

Title TRUSTEE
Name TASSEY, JEFFREY
Address 1129 20TH ST NW
 SUITE 300
City-State-Zip: WASHINGTON DC 20036

Title TRUSTEE
Name VADHANI, BHAVESH
 NARENDRAKUMAR
Address 8000 TOWERS CRESCENT DRIVE
 SUITE 1000
City-State-Zip: TYSONS CORNER VA 22182

Title TRUSTEE
Name RUIZ, ROBERT J. ESQ.
Address 100 WEST RANDOLPH ST
 SUITE 8-200
City-State-Zip: CHICAGO IL 60601

Title TRUSTEE
Name WEXLER, PATRICIA
Address 277 PARK AVE
 14TH FLOOR
City-State-Zip: NEW YORK NY 10017

Continues on page 2

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM MALSEED

**SECRETARY &
TREASURER**

04/19/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title TRUSTEE
Name HARRIS, JAMES
Address 5432 KERGER ROAD
City-State-Zip: ELLICOTT CITY MD 21043

Title TRUSTEE
Name DAVIDOW , JAKE A.
Address 5 MANHATTAN W. 450, 34TH STREET
City-State-Zip: NEW YORK NY 10001