2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2022
Secretary of State
0603014280CC

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Entity Name: AMERICAN CONSUMER CREDIT COUNSELING, INC.

Current Principal Place of Business:

130 RUMFORD AVE.
SUITE 202
AUBURNDALE, MA 02466

Current Mailing Address:

130 RUMFORD AVE.
SUITE 202
AUBURNDALE, MA 02466 US

FEI Number: 04-3166982

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC.
155 OFFICE PLAZA DRIVE
SUITE A
TALLAHASSEE, FL 32301 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	PRESIDENT
Name	AMADIN, ALLEN
Address	130 RUMFORD AVE. SUITE 202
City-State-Zip:	AUBURNDALE MA 02466

Title	VP
Name	DONNA, CONLEY
Address	130 RUMFORD AVE. SUITE 202
City-State-Zip:	AUBURNDALE MA 02466

Title	DIRECTOR
Name	CURRIE, JAMES
Address	5 LAUREL DRIVE
City-State-Zip:	HUDSON MA 01749

Title	DIRECTOR
Name	SERGI, JOHN
Address	1700 TRAPELO ROAD
City-State-Zip:	WALTHAM MA 02451

Title	DIRECTOR
Name	FRADETTE, DONALD
Address	211 SAND TRAP COURT
City-State-Zip:	NORTHBRIDGE MA 01534

Title	DIRECTOR
Name	STASIO, JOSEPH
Address	73 FAIRVIEW AVENUE
City-State-Zip:	SWAMPSCOTT MA 01907

Title	DIRECTOR
Name	LOPEZ, KENNETH
Address	50 WOODCLIFF DRIVE
City-State-Zip:	WALTHAM MA 02451

Title	DIRECTOR
Name	SILVA, MICHAEL
Address	6 TECHNOLOGY DRIVE APT#351
City-State-Zip:	CHELMSFORD MA 01863

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

SIGNATURE: DONNA CONLEY VICE PRESIDENT 04/14/2022

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	PAPAZIAN, MARY
Address	5 PHOENIX PLACE
City-State-Zip:	ANDOVER MA 01810

Title	DIRECTOR
Name	ROJAS, LILIAN
Address	1210 TRAPELO ROAD
City-State-Zip:	WALTHAM MA 02451