

SCC eFile

**2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

213508746

1.) CORPORATION NAME:

**Consolidated Credit Counseling Services, Inc.**

DUE DATE: **3/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC  
4701 COX ROAD  
SUITE 301**

SCC ID NO: **F1540311**

5.) STOCK INFORMATION

|       |            |
|-------|------------|
| CLASS | AUTHORIZED |
|-------|------------|

**GLEN ALLEN, VA 23060-6802**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**FL**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5701 WEST SUNRISE BLVD

CITY/ST/ZIP: FT. LAUDERDALE, FL 33313

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: GARY HERMAN  
TITLE: PRESIDENT  
ADDRESS: 1719 SPARROW LANE  
CITY/ST/ZIP/CO: WESTON, FL 33327

OFFICER  DIRECTOR

NAME: HILTON SHER  
TITLE: VP/T  
ADDRESS: 201 S HIBISCUS COURT  
CITY/ST/ZIP/CO: PLANTATION, FL 33317

OFFICER  DIRECTOR

NAME: ROMEO LIBREA  
TITLE: SECRETARY  
ADDRESS: 700 SW 78th Ave , #706  
CITY/ST/ZIP/CO: Plantation, FL 33324

OFFICER  DIRECTOR

NAME: MELANIE DERNIS  
TITLE: DIRECTOR  
ADDRESS: 9655 S DIXIE HWY #205  
CITY/ST/ZIP/CO: MIAMI, FL 33156

OFFICER  DIRECTOR

NAME: WILLIAM KALIN  
TITLE: DIRECTOR  
ADDRESS: 10000 COLEBROOK AVENUE  
CITY/ST/ZIP/CO: POTOMAC, MD 20854

OFFICER  DIRECTOR

NAME: Andrew Weisman  
TITLE: DIRECTOR  
ADDRESS: 7650 NW 47th Drive  
CITY/ST/ZIP/CO: Coral Springs, FL 33067

OFFICER  DIRECTOR

|                 |                       |                                  |  |
|-----------------|-----------------------|----------------------------------|--|
| NAME:           | Susan Stern           | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| TITLE:          | DIRECTOR              |                                  |  |
| ADDRESS:        | 6482 Las Flores Drive |                                  |  |
| CITY/ST/ZIP/CO: | Boca raton, FL 33433  |                                  |  |

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

|   |                                  |           |
|---|----------------------------------|-----------|
| /s/ HILTON SHER                                     | HILTON SHER, VP/T                | 2/20/2013 |
| SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT | PRINTED NAME AND CORPORATE TITLE | DATE      |

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.