

SCC eFile

**2016 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

216509541

1.) CORPORATION NAME:

Consolidated Credit Counseling Services, Inc.

DUE DATE: **3/31/2016**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS INC
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **F1540311**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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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	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1719 SPARROW LANE		
CITY/ST/ZIP/CO:	WESTON, FL 33327		

NAME:	HILTON SHER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/T		
ADDRESS:	201 S HIBISCUS COURT		
CITY/ST/ZIP/CO:	PLANTATION, FL 33317		

NAME:	ROMEO LIBREA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	700 SW 78TH AVE , #706		
CITY/ST/ZIP/CO:	PLANTATION, FL 33324		

NAME:	MELANIE DERNIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7295 S.W. 132ND ST		
CITY/ST/ZIP/CO:	MIAMI, FL 33156		

NAME:	WILLIAM KALIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12142 BENTRIDGE PLACE		
CITY/ST/ZIP/CO:	POTOMAC, MD 20854		

NAME:	JONATHAN SHERRY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1565 BRIDGEWOOD DR		
CITY/ST/ZIP/CO:	BOCA RATON, FL 33434		

NAME:	ANDREW WEISMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7650 NW 47TH DRIVE		
CITY/ST/ZIP/CO:	CORAL SPRINGS, FL 33067		

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	3/16/2016
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.