

No. C 161675		Due no later than Jul 31, 2008		2. Registered Agent and Address (NO PO BOX)		
Return to: SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080 NO FILING FEE IF RECEIVED BY DUE DATE		Annual Report Form 1. Mailing Address: Correct in this box if needed. FAMILY CREDIT COUNSELING SERVICE, INC. PATRICK F STEVA 4304-06 CHARLES ST ROCKFORD IL 61108		NATIONAL REGISTERED AGENTS 1423 TYRELL LN BOISE ID 83706		
				3. <u>New</u> Registered Agent Signature:*		
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors. Treasurer (optional).						
Office Held	Name	Street or PO Address	City	State	Country	Postal Code
DIRECTOR	ARTHUR L CRONEY	340 WATER STREET	WILMINGTON	CA	USA	90744
PRESIDENT	MICHAEL J MCAULIFFE	4304-06 CHARLES STREET	ROCKFORD	IL	USA	61108
SECRETARY	CURTIS E GALLOWAY	4304-06 CHARLES STREET	ROCKFORD	IL	USA	61108
DIRECTOR	RON RUCKERT	1113 NORFOLK AVENUE	WESTCHESTER	IL	USA	60154
DIRECTOR	NADINE URBAN	30 NORTH LASALLE STREET	CHICAGO	IL	USA	60602
DIRECTOR	CAROL PARLIN	801 OGDEN AVENUE	LISLE	IL	USA	60532
DIRECTOR	LORETTA DALY	123 MADISON STREET	OAK PARK	IL	USA	60302
5. Organized Under the Laws of: IL C 161675		6. Annual Report must be signed.* Signature: Michael J. McAuliffe Name (type or print): Michael J. McAuliffe Date: 07/18/2008 Title: President				
Processed 07/18/2008		* Electronically provided signatures are accepted as original signatures.				