

No. C 140226		Due no later than Aug 31, 2018 Annual Report Form		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		1. Mailing Address: Correct in this box if needed. ALLIANCE CREDIT COUNSELING, INC. KERRY P PORTER 10720 SIKES PL 100 CHARLOTTE NC 28277		NATIONAL REGISTERED AGENTS INC 921 S ORCHARD ST STE G BOISE ID 83705		
				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
PRESIDENT	KEVIN P PORTER	4335 PIPER GLENN DR	CHARLOTTE	NC	USA	28277
DIRECTOR	DOUGLASS C COLBERT	4002 BEAVERBROOK DR	INDIAN TRAIL	NC	USA	28079
DIRECTOR	DR. PAMELA R TURNER, PH.D	120 BRECKENRIDGE LN	ATHENS	GA	USA	30606
DIRECTOR	CHARLES E OLIPHANT	6558 CROSSFIELD LN	CHARLOTTE	NC	USA	28226
TREASURER	KERRY P PORTER	11914 SOUTHCREST LN	PINEVILLE	NC	USA	28134
SECRETARY	SCOTT HANNAY	11416 FOGGY BANK LN	CHARLOTTE	NC	USA	28214
5. Organized Under the Laws of: NC C 140226		6. Annual Report must be signed.* Signature: Kerry P Porter Name (type or print): Kerry P Porter Date: 08/14/2018 Title: Treasurer				
Processed 08/14/2018		* Electronically provided signatures are accepted as original signatures.				