#### 2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000004660

Entity Name: GARDEN STATE CONSUMER CREDIT COUNSELING, INC.

**FILED** Apr 11, 2018 **Secretary of State** CC1705897277

## **Current Principal Place of Business:**

200 U.S. HIGHWAY 9 MANALAPAN, NJ 07726

## **Current Mailing Address:**

200 U.S. HIGHWAY 9

MANALAPAN. NJ 07726 US

FEI Number: 22-3120920 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Name

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title С Title EXECUTIVE DIRECTOR, DIRECTOR

KATSAMAKIS, BASIL Name Name GREENBERG, JOEL

1530 PALISADE AVENUE, #22N Address 60 SUTTON PLACE SOUTH Address

APT 4ES City-State-Zip: FORT LEE NJ 07024

City-State-Zip: NEW YORK NY 10022

**CFO** Title Title COO Name

SULER, TODD Name FELDMAN, JILL Address 200 U.S. HIGHWAY 9

200 U.S. HIGHWAY 9 Address

MANALAPAN NJ 07726 City-State-Zip: City-State-Zip: MANALAPAN NJ 07726

Title

Title Name NOONAN, MARGARETTA

FIGART, DEBORAH PH.D. Address 1101WASHINGTON AVENUE 2001 HAMILTON STREET Address

**UNIT 505** 

**APT 808** City-State-Zip: PHILADELPHIA PA 19147

PHILADELPHIA PA 19130 City-State-Zip:

Title **DIRECTOR** Title DIRECTOR Name LOPEZ. ROY

Name MCGRAW, KELLY

Address 6258 VELASCO AVENUE 5501 ROSEHILL ROAD Address

City-State-Zip: DALLAS TX 75214 **UNIT 204** 

City-State-Zip: SARASOTA FL 34233

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

04/11/2018 COO SIGNATURE: JILL FELDMAN

# Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameLAWRENCE, WILLIAMNameROSE, GRAHAMAddress144 GOVERNORS WAYAddress100 LINKS OF LEITH

City-State-Zip: BRENTWOOD TN 37027 City-State-Zip: WILLIAMSBURG VA 23188

Title DIRECTOR Title DIRECTOR

Name PITOCCO, DENNIS Name DEFRANK, DONNA

Address 4834 SKY BLUE DRIVE Address 195 NORTH HARBOR DRIVE

#1003

City-State-Zip: LUTZ FL 33558-8058 City-State-Zip: CHICAGO IL 60601