



State of Rhode Island and Providence Plantations
Office of the Secretary of State

Fee: \$20.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Foreign Non-Profit
Annual Report**

Filing Period: June 1 - June 30

In accordance with R.I.G.L. 7-6-94, each corporation failing or refusing to file its annual report within the time prescribed by law (R.I.G.L. 7-6-91) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000791692

2. Name of Corporation Debt Management Credit Counseling Corp.

3. State of Incorporation

State: FL

4. Corporate Address in Rhode Island

No. and Street: 450 VETERANS MEMORIAL PARKWAY

City or Town: EAST PROVIDENCE

State: RI Zip: 02914 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 3310 N. FEDERAL HIGHWAY

City or Town: LIGHTHOUSE POINT State: FL Zip: 33064 Country: UNI

6. Brief Description of the Character of the Affairs Which are Actually Conducted in Rhode Island

CREDIT COUNSELING

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
PRESIDENT	PHIL HEINEMANN	3310 N. FEDERAL HIGHWAY LIGHTHOUSE POINT, RI 33064 USA
TREASURER	WILLIAM KALAF	3310 N. FEDERAL HIGHWAY LIGHTHOUSE POINT, FL 33064 USA
SECRETARY	CAROLINE OBRIEN	3310 N. FEDERAL HIGHWAY LIGHTHOUSE POINT, FL 33064 USA
VICE PRESIDENT	SHANNON SCHAFFER	3310 N. FEDERAL HIGHWAY LIGHTHOUSE POINT, FL 33064 USA

OTHER OFFICER	PHIL HEINEMANN	
DIRECTOR	JUAN E. ALEMAN	3310 N. FEDERAL HIGHWAY LIGHTHOUSE POINT, FL 33064 USA

8. REGISTERED AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 641 - R.I.G.L. 7-6-13 / 7-6-78

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST
PROVIDENCE , RI 02914

9. This report must be signed by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, duly Authorized Representative, Receiver, or Trustee.

Signed this 8 Day of May, 2015 at 12:02:16 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-6.*

By PHIL HEINEMANN
Signature of Authorized Person

Form No. 631
Revised 09/07

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