



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: 2016

1. Corporate ID No. 000797058

2. Name of Corporation Family Credit Counseling Service, Inc.

3. State of Incorporation

State: IL

4. Corporate Address in Rhode Island

No. and Street: 450 VETERANS MEMORIAL PARKWAY, STE 7A

City or Town: EAST PROVIDENCE

State: RI Zip: 02914 Country: USA

5. Foreign Corporation. Enter Principal Office Address

No. and Street: 4304-06 CHARLES STREET

City or Town: ROCKFORD State: IL Zip: 61108 Country: USA

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

EDUCATION, BUDGET AND HOUSING COUNSELING AND DEBT MANAGEMENT SERVICES

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	MICHAEL MCAULIFFE	2111 CARLISLE STREET ALGONQUIN, IL 60102 USA
SECRETARY	CURTIS GALLOWAY	922 NORTH BLVD, #808 OAK PARK, IL 60301 USA
CFO	ELIZABETH SCHOMBURG	10046 TYBOW TRAIL ROSCOE, IL 61073 USA

DIRECTOR	ARTHUR CRONEY	259 ORTEGA DRIVE NEWBURY PARK, CA 91320 USA
DIRECTOR	CURTIS GALLOWAY	922 NORTH BLVD, #808 OAK PARK , IL 60301 USA
DIRECTOR	LORETTA DALY	3323 VERNON AVENUE BROOKFIELD, IL 60513 USA
DIRECTOR	LOURDES DELGADO-SERRANO	9822 W LAMPLIGHTER LANE HANNA CITY, IL 61536 USA
DIRECTOR	CAROL PARLIN	3950 N LAKE SHORE DRIVE, #1301 CHICAGO, IL 60613 USA
DIRECTOR	RON RUCKERT	1113 NORFOLK AVENUE WESTCHESTER, IL 60154 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

BUSINESS FILINGS INTERNATIONAL, 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 26 Day of May, 2016 at 7:28:04 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 ELIZABETH SCHOMBURG
Signature of Authorized Person

Form No. 631
Revised 09/07