

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000074428

**FILED**  
**Jan 18, 2010**  
**Secretary of State**

**Entity Name:** COLLATERAL RECOVERY GROUP LLC

**Current Principal Place of Business:**

1500 BEVILLE ROAD, STE. 606-104  
DAYTONA BEACH, FL 321145644 US

**New Principal Place of Business:**

2210 HIBISCUS DRIVE  
EDGEWATER, FL 32141 US

**Current Mailing Address:**

P.O. BOX 915  
EDGEWATER, FL 32132 US

**New Mailing Address:**

2210 HIBISCUS DRIVE  
EDGEWATER, FL 32141 US

**FEI Number:** 26-3103000

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LAPINA & DUBOIS P.A.  
ATTN: SHANNON K. BALMER  
132 CANAL STREET, STE. 3  
NEW SMYRNA BEACH, FL 32168 US

**Name and Address of New Registered Agent:**

LAPINA & DUBOIS P.A.  
ATTN: SHANNON K. BALMER  
707 MENDHAM BOULEVARD, SUITE 100  
ORLANDO, FL 32825 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: SHANNON K. BALMER

01/18/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: LARISCY, GREGORY E  
Address: 1500 BEVILLE ROAD SUITE 606-104  
City-St-Zip: DAYTONA BEACH, FL 32114 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: GREGORY LARISCY

MGRM

01/18/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date