

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000001420

Entity Name: FEDCHEX RECOVERY, LLC

FILED  
Apr 30, 2008  
Secretary of State

**Current Principal Place of Business:**

17252 ARMSTRONG AVE, SUITE E  
IRVINE, CA 92614

**New Principal Place of Business:**

17252 ARMSTRONG AVE.  
SUITE A  
IRVINE, CA 92614

**Current Mailing Address:**

17252 ARMSTRONG AVE, SUITE E  
IRVINE, CA 92614

**New Mailing Address:**

17252 ARMSTRONG AVE.  
SUITE A  
IRVINE, CA 92614

FEI Number: 33-0980264

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

LEXISNEXIS DOCUMENT SOLUTIONS, INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: DAVIS, RODNEY K CEO  
Address: 17252 ARMSTRONG AVE, STE E  
City-St-Zip: IRVINE, CA 92614

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: DAVIS, RODNEY K CEO  
Address: 17252 ARMSTRONG AVE. SUITE A  
City-St-Zip: IRVINE, CA 92614

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: CARRIE HOBGOOD

ACCT

04/30/2008

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