

# **2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M05000004360

**FILED**  
**Mar 15, 2006**  
**Secretary of State**

**Entity Name:** PRA GOVERNMENT SERVICES, LLC

**Current Principal Place of Business:**

120 CORPORATE BOULEVARD, SUITE 100  
NORFOLK, VA 23502

**New Principal Place of Business:**

3001 2ND AVENUE SOUTH  
BIRMINGHAM, AL 35233

**Current Mailing Address:**

120 CORPORATE BOULEVARD, SUITE 100  
NORFOLK, VA 23502

**New Mailing Address:**

**FEI Number:** 34-2050121      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

NRAI SERVICES, INC.  
2731 EXECUTIVE PARK DRIVE, SUITE 4  
WESTON, FL 33331 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: MGR ( ) Delete  
Name: SCOTT, JUDITH S  
Address: 120 CORPORATE BOULEVARD, SUITE 100  
City-St-Zip: NORFOLK, VA 23502

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: PORTFOLIO RECOVERY A, SSOCIATES, INC .  
Address: 120 CORPORATE BOULEVARD, SUITE 100  
City-St-Zip: NORFOLK, VA 23502

I hereby certify that the information supplied with this filing does not qualify for the 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: JUDITH SCOTT

MGRM

03/15/2006

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