

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004121

**FILED**  
**Apr 10, 2010**  
**Secretary of State**

**Entity Name:** COMMERCIAL RECOVERY SYSTEMS, INC.

**Current Principal Place of Business:**

8035 EAST R.L. THORNTON, SUITE 220  
DALLAS, TX 75228

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 570909  
DALLAS, TX 753570909

**New Mailing Address:**

**FEI Number:** 75-2547093

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PC  
Name: FORD, TIM  
Address: 8035 EAST R.L. THORNTON FREEWAY, STE 305  
City-St-Zip: DALLAS, TX 75228

Title: V  
Name: DEVANY, DAVID  
Address: 8035 EAST R.L. THORNTON FREEWAY, STE 216  
City-St-Zip: DALLAS, TX 75228

Title: T  
Name: COX, CAROLYN  
Address: 8035 EAST R.L. THORNTON FREEWAY, STE 316  
City-St-Zip: DALLAS, TX 75228

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TIM FORD

PC

04/10/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date