2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000002117

Entity Name: CSG RECOVERY, INC.

City-St-Zip:

FORT LEE, NJ 07024

FILED Feb 17, 2009 Secretary of State

Entity Nai	me: CSG RE	COVERY, INC.			
Current Principal Place of Business:			New Principal Place o	New Principal Place of Business:	
2200 FLE1	CHER AVE				
5TH FL FORT LEE, NJ 07024					
FURILEE	E, NJ 07024				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
2200 FLETCHER AVE				COLLECTION LICENSING, LLC	
5TH FL FORT LEE	5TH FL FORT LEE, NJ 07024		P. O. BOX 33797 NORTHGLENN CO. 8	P. O. BOX 33797 NORTHGLENN, CO 80233	
	: 20-8489884	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
		,	,	, ,	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
2731 EXEC STE 4 WESTON,	VICES, INC. CUTIVE PARK FL 33331 U	S	nurnoso of abanging its registered	office or registered agent, or both,	
	e of Florida.	submits this statement for the p	purpose of changing its registered	ronice or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	ent	Date	
Election Car	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	*) Delete		() Change () Addition	
Name: Address:	GOLDBERG, D	DAVID S ER AVE 5TH FL	Name: Address:		
City-St-Zip:	FORT LEE, NJ		City-St-Zip:		
Title:	VP () Delete	Title:	()Change ()Addition	
Name:	HANAUER, JEI	REMY	Name:	Name: Address: City-St-Zip:	
Address: City-St-Zip:	2200 FLETCHI FORT LEE, NJ	ER AVE 5TH FL 07024			
Title:	S () Delete	Title:	() Change () Addition	
Name:	HANAUER, JEI	REMY ER AVE 5TH FL	Name: Address:		
Address:	2200 FLE UNI	_IX	Audiess.		

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 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 an address, with all other like empowered.

City-St-Zip:

SIGNATURE: DAVID S. GOLDBERG CP 02/17/2009