

# **2004 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000027474

**FILED**  
**Jan 10, 2004**  
**Secretary of State**

**Entity Name:** COLLECTIONSREPORTING.COM, LLC

**Current Principal Place of Business:**

332 CASA GRANDE LANE, SUITE 200  
SANTA ROSA BEACH, FL 32459

**New Principal Place of Business:**

332 CASA GRANDE LANE, SUITE 200  
SANTA ROSA BEACH, FL 32459 US

**Current Mailing Address:**

P.O. BOX 6886  
MIRAMAR BEACH, FL 32550

**New Mailing Address:**

P.O. BOX 6886  
MIRAMAR BEACH, FL 32550 US

**FEI Number:** 20-0121445

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HUTCHINS, DAVID S  
332 CASA GRANDE LANE, SUITE 200  
SANTA ROSA BEACH, FL 32459

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

HUTCHINS, DAVID S  
332 CASA GRANDE LANE, SUITE 200  
SANTA ROSA BEACH, FL 32459 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:

01/10/2004

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MEMBERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: HUTCHINS, DAVID S MR.  
Address: P. O. BOX 6886  
City-St-Zip: MIRAMAR BEACH, FL 32550 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DAVID S. HUTCHINS

MR

01/10/2004

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