

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000064032

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: PEAK CREDIT SERVICES, LLC

## Current Principal Place of Business:

10225 ULMERTON ROAD  
SUITE 3D  
LARGO, FL 33771

## New Principal Place of Business:

10225 ULMERTON ROAD  
SUITE 7B  
LARGO, FL 33771

## Current Mailing Address:

10225 ULMERTON ROAD  
SUITE 3D  
LARGO, FL 33771

## New Mailing Address:

10225 ULMERTON ROAD  
SUITE 7B  
LARGO, FL 33771

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PEAK CAPITAL CORPORATION  
10225 ULMERTON ROAD  
SUITE 3D  
LARGO, FL 33771 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: PEAK CAPITAL CORPORATION  
Address: 10225 ULMERTON ROAD SUITE 3D  
City-St-Zip: LARGO, FL 33771

Title: MGR ( ) Delete  
Name: STEPHEN, CERRONE  
Address: 1037 19TH AVE N APT 3  
City-St-Zip: SAINT PETERSBURG, FL 33704

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGR (X) Change ( ) Addition  
Name: STEPHEN, CERRONE  
Address: 1040 19TH AVE N  
City-St-Zip: SAINT PETERSBURG, FL 33704

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: DAVID W DUBE

MGRM

04/30/2009

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