

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000053023

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** PORTFOLIO MANAGEMENT OUTSOURCING SOLUTIONS, LLC

**Current Principal Place of Business:**

2015 VAUGHN ROAD BLDG 400  
KENNESAW, GA 30144

**New Principal Place of Business:**

2002 SUMMIT BLVD. SUITE 600  
ATLANTA, GA 30319 US

**Current Mailing Address:**

2015 VAUGHN ROAD BLDG 400  
KENNESAW, GA 30144

**New Mailing Address:**

2002 SUMMIT BLVD. SUITE 600  
ATLANTA, GA 30319 US

FEI Number: 26-2712102

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name: SHEPRO, WILLIAM B  
Address: 2002 SUMMIT BLVD. SUITE 600  
City-St-Zip: ATLANTA, GA 30319 US

Title: MGR  
Name: STILES, ROBERT D  
Address: 2002 SUMMIT BLVD. SUITE 600  
City-St-Zip: ATLANTA, GA 30319 US

Title: MGR  
Name: WILCOX, KEVIN J  
Address: 2002 SUMMIT BLVD. SUITE 600  
City-St-Zip: ATLANTA, GA 30319 US

I hereby 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: ANNE MEYER

POA

04/12/2011

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