

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000107980

**FILED**  
**Jan 16, 2012**  
**Secretary of State**

**Entity Name:** RCS RECOVERY SERVICES, LLC

**Current Principal Place of Business:**

1499 W. PALMETTO PARK RD., STE 140  
BOCA RATON, FL 33486

**New Principal Place of Business:**

**Current Mailing Address:**

1499 W. PALMETTO PARK RD., STE 140  
BOCA RATON, FL 33486

**New Mailing Address:**

**FEI Number:** 27-1145612

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BEIGHLEY, MYRICK & UDELL, PA  
1255 W ALANTIC BLVD STE 314  
POMPANO BEACH, FL 33069 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  
**Name:** RCS RECOVERY CORP.  
**Address:** 1499 W. PALMETTO PARK RD., STE 140  
**City-St-Zip:** BOCA RATON, FL 33486

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: SETH A. MILLER

PRES

01/16/2012

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