2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: QORVAL CREDITOR RECOVERY SERVICES, LLC

Current Principal Place of Business:

2210 VANDERBILT BEACH ROAD
SUITE 1206
NAPLES, FL 34109 US

New Principal Place of Business:

Current Mailing Address:

2210 VANDERBILT BEACH ROAD
SUITE 1206
NAPLES, FL 34109 US

New Mailing Address:

FEI Number: 27-4592133 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVY, JUDY M
2210 VANDERBILT BEACH ROAD
SUITE 1206
NAPLES, FL 34109 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: STICKEL, MARK S
Address: 4301 ANCHOR PLAZA PARKWAY, SUITE 360
City-St-Zip: TAMPA, FL 33634 US

Title: MGR
Name: KEIPPER, PAUL E
Address: 4301 ANCHOR PLAZA PARKWAY, SUITE 360
City-St-Zip: TAMPA, FL 33634 US

Title: MGR
Name: NEWSOM, MICHAEL L
Address: 4301 ANCHOR PLAZA PARKWAY, SUITE 360
City-St-Zip: TAMPA, FL 33634 US

Title: MGR
Name: MALONE, JAMES R
Address: 2210 VANDERBILT BEACH ROAD, SUITE 1206
City-St-Zip: NAPLES, FL 34109 US

Title: MGR
Name: MAY, TIMOTHY M
Address: 2210 VANDERBILT BEACH ROAD, SUITE 1206
City-St-Zip: NAPLES, FL 34109 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 Statues.

SIGNATURE: JAMES R. MALONE MGR 01/04/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date