

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000098863

**FILED**  
**Feb 27, 2012**  
**Secretary of State**

**Entity Name:** NATIONAL CASH RECOVERY, LLC

**Current Principal Place of Business:**

12720 N.W. 109 TH. LANE  
ALACHUA, FL 326156741 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O HECTOR COURNOYER 7200 COUNTY ROAD 603  
BUSHNELL, FL 33513 US

**New Mailing Address:**

C/O ROBIN SINGER 7755 E. QUINCY AVE.  
APT T56  
DENVER, CO 80237 US

**FEI Number:** 45-3120851

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COURNOYER, HECTOR  
C/O HECTOR COURNOYER 7200 COUNTY ROAD 603  
BUSHNELL, FL 33513 US

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

COURNOYER, HECTOR  
12720 N.W. 109TH LANE  
ALACHUA, FL 32615 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:

02/27/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: COURNOYER, HECTOR  
Address: C/O ROBIN SINGER 7755 QUINCY AVE. APT T56  
City-St-Zip: DENVER, CO 80237 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: HECTOR S. COURNOYER

MGRM

02/27/2012

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