

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Feb 21, 2011
Secretary of State

Entity Name: A.R.C ACCOUNTS RECOVERY (U.S.A.) CORPORATION LLC

Current Principal Place of Business:

4240 GLANFORD AVE
VICTORIA, CANADA, BC V8Z 4B8 XX

New Principal Place of Business:

Current Mailing Address:

4240 GLANFORD AVE
100
VICTORIA, CANADA, BC V8Z 0A1 XX

New Mailing Address:

FEI Number: 98-0377553 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FLORIDA FILING & SEARCH SERVICES
155 OFFICE PLAZA DR
SUITE A
TALLAHASSEE, FL 32301 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: MEMB
Name: POLARD, JOSEPH M MANAGER
Address: 4240 GLANFORD AVE, SUITE 100
City-St-Zip: VICTORIA, B.C., CANADA, BC V8Z 0A1

Title: MEMB
Name: POLARD, MAURICE J PRESIDE
Address: 4240 GLANFORD AVE, SUITE 100
City-St-Zip: VICTORIA, BC, CANADA, BC V8Z 0A1

Title: MEMB
Name: LUNDSTROM, KAREN J TREASUR
Address: 4240 GLANFORD AVE, SUITE 100
City-St-Zip: VICTORIA, B.C., CANADA, BC V8Z 0A1

Title: MEMB
Name: MACDONALD, MICHELLE L SECRETA
Address: 4240 GLANFORD AVE, SUITE 100
City-St-Zip: VICTORIA, B.C., CANADA, BC V8Z 0A1

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: MICHELLE MACDONALD

MEMB

02/21/2011

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