## 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M03000000181

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

FILED Apr 09, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

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

Current Mailing Address: New Mailing Address:

4240 GLANFORD AVE

VICTORIA, CANADA, BC V8Z 0A1 XX

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

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

FLORIDA FILING & SEARCH SERVICES 155 OFFICE PLAZA DR SUITE A TALLAHASSEE, FL 32301 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

in the State of Florida.

Electronic Signature of Registered Agent

istered Agent Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MEMB

SIGNATURE:

 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 Statues.

SIGNATURE: MICHELLE MACDONALD MEMB 04/09/2012