

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001390

FILED
Mar 20, 2009
Secretary of State

Entity Name: PERFORMANCE CAPITAL MANAGEMENT, LLC

Current Principal Place of Business:

7001 VILLAGE DR., SUITE 255
BUENA PARK, CA 90621

New Principal Place of Business:

Current Mailing Address:

7001 VILLAGE DR., SUITE 255
BUENA PARK, CA 90621

New Mailing Address:

FEI Number: 03-0375751

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 () Delete
Name: CALDWELL, DAVE
Address: 7001 VILLAGE DR., SUITE 255
City-St-Zip: BUENA PARK, CA 90621

Title: MGR (X) Delete
Name: CONSTANTINO, WILLIAM
Address: 7001 VILLAGE DR., SUITE 255
City-St-Zip: BUENA PARK, CA 90621

Title: MGR () Delete
Name: BARD, DARREN
Address: 7001 VILLAGE DR., SUITE 255
City-St-Zip: BUENA PARK, CA 90621

Title: MGR () Delete
Name: BARNHIZER, DAVID
Address: 7001 VILLAGE DR., SUITE 255
City-St-Zip: BUENA PARK, CA 90621

Title: MGR () Delete
Name: BISHOP, LES
Address: 7001 VILLAGE DR., SUITE 255
City-St-Zip: BUENA PARK, CA 90621

Title: MGR () Delete
Name: GADD, LARISA
Address: 7001 VILLAGE DR., SUITE 255
City-St-Zip: BUENA PARK, CA 90621

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: DAVID CALDWELL

MGR

03/20/2009

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