

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005372

FILED
Apr 28, 2005
Secretary of State

Entity Name: WEST TRANSACTION SERVICES, LLC

Current Principal Place of Business:

MS W11-LEGAL
11808 MIRACLE HILLS DRIVE
OMAHA, NE 68154

New Principal Place of Business:

Current Mailing Address:

MS W11-LEGAL
11808 MIRACLE HILLS DRIVE
OMAHA, NE 68154

New Mailing Address:

FEI Number: 20-1907696 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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/MEMBERS:

Title: MGR () Delete
Name: BERGER, NANCEE R
Address: 11808 MIRACLE HILLS DRIVE
City-St-Zip: OMAHA, NE 68154

Title: MGR () Delete
Name: MEDLIK, PAUL M
Address: 11808 MIRACLE HILLS DRIVE
City-St-Zip: OMAHA, NE 68154

Title: MGR () Delete
Name: STANGL, STEVEN M
Address: 11808 MIRACLE HILLS DRIVE
City-St-Zip: OMAHA, NE 68154

Title: () Delete
Name:
Address:
City-St-Zip:

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: MGR () Change (X) Addition
Name: HAGEN, DAVID M
Address: 11808 MIRACLE HILLS DRIVE
City-St-Zip: OMAHA, NE 68154

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL M. MENDLIK

MGR

04/28/2005

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