

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000005372

FILED  
Apr 18, 2006  
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:**

% CORPORATION SERVICE COMPANY  
2711 CENTERVILLE RD., SUITE 400  
WILMINGTON, DE 19808

**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/MANAGERS:**

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

**ADDITIONS/CHANGES:**

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

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

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

Title: MGR (X) Change ( ) Addition  
Name: HANSON, JON R  
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 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: PAUL M. MENDLIK

MGR

04/18/2006

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