## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M05000001892

Entity Name: XROADS CASE MANAGEMENT SERVICES, LLC

FILED Apr 07, 2009 Secretary of State

| Current Principal Place of Business: New Principal Place of Business | Current Principal Place of Business: | New Principal Place of Business |
|--|--------------------------------------|---------------------------------|
|--|--------------------------------------|---------------------------------|

1821 E. DYER ROADS
1821 E. DYER ROADS

SUITE 225 SUITE 225

SANTA ANA, CA 92705 SANTA ANA, CA 92705 US

Current Mailing Address: New Mailing Address:

1821 E. DYER ROADS 1821 E. DYER ROADS

SUITE 225 SUITE 225

SANTA ANA, CA 92705 SANTA ANA, CA 92705 US

FEI Number: 20-2557611 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:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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.

SIGNATURE:

Flackwaria Olivanskura of Davishara d Avant

Title:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES:

MGRM

SIMON, DENNIS I

1821 EAST DYER ROAD, #225

SANTA ANA, CA 92705 US

Electronic Signature of Registered Agent

Date

(X) Change ( ) Addition

## MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete Name: SIMON, DENNIS I

Address: 150 W. 56TH STREET, APT. 4501

City-St-Zip: NEW YORK, NY 10019

Title: ( ) Delete Title: MGR ( ) Change (X) Addition

Name: Name: SIMON, JOEL M

Address: Address: 400 MADISON AVENUE, 3RD FLOOR

City-St-Zip: City-St-Zip: NEW YORK, NY 10017 US

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: JOEL M. SIMON MGR 04/07/2009