



2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 21, 2006 08:00 AM
Secretary of State

DOCUMENT # M05000006259 1. Entity Name: SPI LITIGATION DIRECT, LLC	
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Principal Place of Business 3500 SOUTH DUPONT HIGHWAY DOVER, DE 19901	Mailing Address 3500 SOUTH DUPONT HIGHWAY DOVER, DE 19901
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DO NOT WRITE IN THIS SPACE

	
07102006No Chg-LLC	CR2E083 (11/05)
4. FEI Number 52-2354028	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$50.00 Due by September 6, 2006

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CU, ERNEST L SPI BLDG., PASOOR DR, STE NINE PARANAQUE 1700 PHILIPPINES,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GANESAN, MADHAVAN SPI BLDG., PASOOR DR, STE NINE PARANAQUE 1700 PHILIPPINES,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BROWN, JIMMIE A 11400 BURNET ROAD, BLDG 5, SUITE 5110 AUSTIN, TX 78758
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U00000571770 07/21/06-80012-006 50.00</p> <p>DO NOT WRITE IN THIS SPACE</p>

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>ANA MARI ZAPANTA</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<u>7/10/06</u> <small>Date</small>	<u>512-2759520</u> <small>Daytime Phone #</small>
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