2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000630

Entity Name: FIRST REVENUE ASSURANCE, LLC

FILED Mar 18, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4500 CHERRY CREEK DRIVE, SOUTH, 3RD FLOOR

DENVER, CO 80246

Current Mailing Address: New Mailing Address:

4500 CHERRY CREEK DRIVE, SOUTH, 3RD FLOOR DENVER, CO $\,80246$

FEI Number: 20-4086095 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:

Electronic Signature of Registered Agent Date

Electronic eignature of registered rigent

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

Name: BOYLAN, KEVÍN Name: NORMAN, TRÁCY L

Address: 4500 CHERRY CREEK DRIVE, SOUTH, 3RD FLOOR Address: 4500 CHERRY CREEK DRIVE, SOUTH, 3RD FLOOR

City-St-Zip: DENVER, CO 80246 City-St-Zip: DENVER, CO 80246

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

Name: LASPADA, JUDY Name: CONAWAY, CHARLES W
Address: 4500 CHERRY CREEK DRIVE. SOUTH. 3RD FLOOR Address: 4500 CHERRY CREEK DRIVE. SOUTH. 3RD FLOOR

City-St-Zip: DENVER, CO 80246 City-St-Zip: DENVER, CO 80246

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: TRACY LYNN NORMAN MGR 03/18/2008