

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000001833

FILED
Apr 25, 2007
Secretary of State

Entity Name: COMPLETE CLAIM SOLUTIONS LLC

Current Principal Place of Business:

3232 MCKINNEY AVENUE, SUITE 1000
DALLAS, TX 75204

New Principal Place of Business:

Current Mailing Address:

3232 MCKINNEY AVENUE, SUITE 1000
DALLAS, TX 75204

New Mailing Address:

FEI Number: 16-1754743

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: MGRM () Delete
Name: SOURCECORP LEGAL INC, .
Address: 3232 MCKINNEY AVENUE, SUITE 1000
City-St-Zip: DALLAS, TX 75204

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

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

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

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

ADDITIONS/CHANGES:

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

Title: MGRM () Change (X) Addition
Name: BOWMAN, ED H JR
Address: 3232 MCKINNEY AVE STE 1000
City-St-Zip: DALLAS, TX 75204

Title: MGRM () Change (X) Addition
Name: GILBERT, CHARLES S
Address: 3232 MCKINNEY AVE STE 1000
City-St-Zip: DALLAS, TX 75204

Title: MGRM () Change (X) Addition
Name: DELGADO, DAVID L
Address: 3232 MCKINNEY AVE STE 1000
City-St-Zip: DALLAS, TX 75204

Title: VP () Change (X) Addition
Name: ANDERSON, KAREN L
Address: 3232 MCKINNEY AVE STE 1000
City-St-Zip: DALLAS, TX 75204

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: KAREN L ANDERSON

VP

04/25/2007

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