

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000000449

FILED
Jan 05, 2012
Secretary of State

Entity Name: WFG LENDER SERVICES, LLC

Current Principal Place of Business:

3001 METRO DRIVE
SUITE 470
BLOOMINGTON, MN 55425

New Principal Place of Business:

3050 METRO DRIVE
SUITE 114
BLOOMINGTON, MN 55425

Current Mailing Address:

340 OSWEGO POINTE DRIVE
SUITE 100
LAKE OSWEGO, OR 97034

New Mailing Address:

12909 SW 68TH PKWY.
SUITE 350
PORTLAND, OR 97223

FEI Number: 20-5836762

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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
Name: DRUM, JOSEPH
Address: 4213 STATE STREET, SUITE 200
City-St-Zip: SANTA BARBARA, CA 93110 US

Title: MGR
Name: STONE, PATRICK
Address: 12909 SW 68TH PKWY., SUITE 350
City-St-Zip: PORTLAND, OR 97223 US

Title: MGR
Name: MCCABE, JOSEPH
Address: 12909 SW 68TH PKWY., SUITE 350
City-St-Zip: PORTLAND, OR 97223 US

Title: MGR
Name: GALLAHER, MICHAEL
Address: 12909 SW 68TH PKWY., SUITE 350
City-St-Zip: PORTLAND, OR 97223 US

Title: MGR
Name: WINKLER, STEVE
Address: 42 SPRING VALLEY RD.
City-St-Zip: WOODBRIDGE, CT 06525

Title: MGR
Name: GAUDREAU, DANIEL
Address: 6100 TENNYSON PARKWAY SUITE 100
City-St-Zip: PLANO, TX 75024

I hereby 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: JOSEPH MCCABE

MGR

01/05/2012

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