

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000003981

FILED  
May 15, 2008  
Secretary of State

**Entity Name:** DEBT RECOVERY MANAGEMENT, LLC

**Current Principal Place of Business:**

77 METRO WAY  
SECAUCUS, NJ 07094

**New Principal Place of Business:**

79 METRO WAY  
SECAUCUS, NJ 07094

**Current Mailing Address:**

77 METRO WAY  
SECAUCUS, NJ 07094

**New Mailing Address:**

79 METRO WAY  
SECAUCUS, NJ 07094

FEI Number: 83-0482262      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: POLLARD, DAWN  
Address: 77 METRO WAY  
City-St-Zip: SECAUCUS, NJ 07094

Title: MGRM      ( ) Delete  
Name: HOPKINS, KAREN  
Address: 77 METRO WAY  
City-St-Zip: SECAUCUS, NJ 07094

**ADDITIONS/CHANGES:**

Title: MGRM      (X) Change ( ) Addition  
Name: POLLARD, DAWN  
Address: 79 METRO WAY  
City-St-Zip: SECAUCUS, NJ 07094

Title: MGRM      (X) Change ( ) Addition  
Name: HOPKINS, KAREN  
Address: 79 METRO WAY  
City-St-Zip: SECAUCUS, NJ 07094

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 HOPKINS

MGRM

05/15/2008

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