## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M08000001956

**Current Principal Place of Business:** 

Entity Name: INDEPENDENT SETTLEMENT SERVICES, LLC

Electronic Signature of Registered Agent

**FILED** Apr 30, 2009 Secretary of State

1000 CLIFF MINE ROAD, SUITE 390 5177 CAMPBELLS RUN ROAD PITTSBURGH, PA 15275 SUITE 390 PITTSBURGH, PA 15205 **Current Mailing Address: New Mailing Address:** 1000 CLIFF MINE ROAD, SUITE 390 5177 CAMPBELLS RUN ROAD PITTSBURGH, PA 15275 SUITE 390 PITTSBURGH, PA 15205 FEI Number: 20-3174239 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: MITRO, STEPHEN P 1527 PALM WOODE DRIVE FT. MYERS, FL 33919 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:

## MANAGING MEMBERS/MANAGERS:

() Delete

CHEZOSKY, JOYCE Name:

Address: 1000 CLIFF MINE ROAD, SUITE 390

City-St-Zip: PITTSBURGH, PA 15275

Title: MGR () Delete

Name: MITRO, DOUG

Address: 1000 CLIFF MINE ROAD, SUITE 390

City-St-Zip: PITTSBURGH, PA 15275 Name:

Date

() Change () Addition

() Change () Addition

New Principal Place of Business:

Address: City-St-Zip:

Title:

Title: Name:

ADDITIONS/CHANGES:

Address: City-St-Zip:

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: DOUGLAS S. MITRO 04/30/2009