

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000003297

FILED
Jan 19, 2011
Secretary of State

Entity Name: RECOVERY MANAGER PRO, LLC

Current Principal Place of Business:

725 SOUTH NOVA ROAD
ORMOND BEACH, FL 32174

New Principal Place of Business:

Current Mailing Address:

725 SOUTH NOVA ROAD
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 27-0764831

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE SUITE 4
WESTON, FL 33331 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: MVCONNECT, LLC
Address: 260 EAST HELEN ROAD
City-St-Zip: PALATINE, IL 60067

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: SCOTT JACKSON

MANA

01/19/2011

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