# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 01, 2012**
**Secretary of State**

DOCUMENT# M10000004788

**Entity Name:** STRATEGIC RECEIVABLE MANAGEMENT SOLUTIONS, LLC

**Current Principal Place of Business:**

26 TRIANGLE PARK DR.
CINCINNATI, OH 45246 US

**New Principal Place of Business:**

17 TRIANGLE PARK DR.
CINCINNATI, OH 45246 US

**Current Mailing Address:**

1600 WEST 7TH STREET
FORT WORTH, TX 76102 US

**New Mailing Address:**

**FEI Number: 45-1484372** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

CAPITOL CORPORATE SERVICES, INC.
155 OFFICE PLAZA DRIVE, SUITE A
TALLAHASSEE, FL 32301 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
Name: CASHLAND FINANCIAL SERVICES, INC.
Address: 1600 WEST 7TH STREET
City-St-Zip: FORT WORTH, TX 76102 US

Title: MGR
Name: LINSCOTT, JOHN C
Address: 1600 W 7TH STREET
City-St-Zip: FORT WORTH, TX 76102 US

Title: MGR
Name: CLAY, DAVID J
Address: 1600 W 7TH STREET
City-St-Zip: FORT WORTH, TX 76102 US

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 Statues.

SIGNATURE: J. CURTIS LINSCOTT MGR 03/01/2012

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