

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M96000000354

FILED
Apr 26, 2004
Secretary of State

Entity Name: EXCELL AGENT SERVICES, L.L.C.

Current Principal Place of Business:

2625 S. PLAZA DRIVE, SUITE 400
TEMPE, AZ 85282

New Principal Place of Business:

Current Mailing Address:

6500 N. BELT LINE ROAD, SUITE 170
IRVING, TX 75063

New Mailing Address:

FEI Number: 86-0751266

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/MEMBERS:

Title: MGR () Delete
Name: ANDREWS, JOHN
Address: 2625 S. PLAZA DRIVE, SUITE 400
City-St-Zip: TEMPE, AZ 85282

Title: MGR () Delete
Name: SORENSEN, GREG
Address: 2625 S. PLAZA DRIVE, SUITE 400
City-St-Zip: TEMPE, AZ 85282

Title: MGR () Delete
Name: HEFFFROM, STEVE
Address: 2625 S. PLAZA DRIVE, SUITE 400
City-St-Zip: TEMPE, AZ 85282

Title: MGR () Delete
Name: ARLINGTON, BRIAN
Address: 2625 S. PLAZA DRIVE, SUITE 400
City-St-Zip: TEMPE, AZ 85282

Title: MGR () Delete
Name: ANDERSON, PETER R
Address: 6500 N. BELT LINE ROAD, SUITE 170
City-St-Zip: IRVING, TX 75063

Title: MEM () Delete
Name: EXCELL GLOBAL SERVIC, ES, INC,
Address: 6500 N. BELT LINE ROAD, SUITE 170
City-St-Zip: IRVING, TX 75063

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: EXCELL GLOBAL SERVIC, ES, INC,
Address: 6500 N. BELT LINE ROAD, SUITE 170
City-St-Zip: IRVING, TX 75063

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PETER R ANDERSON

MGR

04/26/2004

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