

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000003269

**FILED**  
**Feb 17, 2012**  
**Secretary of State**

**Entity Name:** SECURITY CREDIT SERVICES, LLC

**Current Principal Place of Business:**

2653 WEST OXFORD LOOP, SUITE 108  
OXFORD, MS 38655

**New Principal Place of Business:**

2653 WEST OXFORD LOOP, SUITE 108  
OXFORD, MS 38655 UN

**Current Mailing Address:**

2653 WEST OXFORD LOOP, SUITE 108  
OXFORD, MS 38655

**New Mailing Address:**

FEI Number: 20-0151539

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 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: ALIAS, WILLIAM A II  
Address: 2653 WEST OXFORD LOOP, SUITE 108  
City-St-Zip: OXFORD, MS 38655

Title: MGRM  
Name: ALIAS, WILLIAM A JR.  
Address: 2653 WEST OXFORD LOOP, SUITE 108  
City-St-Zip: OXFORD, MS 38655

Title: MGRM  
Name: LEWIS, JOHN H  
Address: 2653 WEST OXFORD LOOP, SUITE 108  
City-St-Zip: OXFORD, MS 38655

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: WILLIAM A. ALIAS, III

MGRM

02/17/2012

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