State of Rhode Island and Providence Plantations Office of the Secretary of State

A. Ralph Mollis, Secretary of State Corporations Division 148 W. River Street. Providence, RI 02904-2615 401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2008 Filing Period: January 1 - March 1 • Filing Fee: \$50.00* THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK * In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00. 2. Name of Corporation 1. Corporate ID No. & S Recovery, 131879 S 71PState 3. Street Address Principal Business Office City 38134 TNSuite 105 Memphis 5739 Stage Rd, State of Incorporation 4. Rusiness Phone No. Tennessee 901-386-0710 6. Brief Description of the Character of Business Conducted in Rhode Island Collection Agency
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) FILL IN SPACES BEFORE USING ATTACHMENTS Vice President Name President Name Earl Palmer Sisson, Jr Street Address Street Address 5739 Stage Rd, Suite 105 711 State ZIPState City City 38134 TNMemphis Treasurer Name Secretary Name Paula K Sisson Street Address Street Address Suite 105 5739 Stage Rd, ŽΙΡ State Citv ZIPState City TN 38134 Memphis FILL IN SPACES BEFORE USING ATTACHMENTS 8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) Director Name Director Name Earl Palmer Sisson, Jr Street Address Street Address Suite 105 5739 Stage Rd, State ZIP ZIPCity State City TN38134 Memphis Director Name Director Name Street Address Street Address State ZIPCity State City 10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) 9. SHARES AUTHORIZED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED AUTHORIZED SHARES Par Value Number of Shares Class/Series Class/Series Par Value Number of Shares 00 1.00 1000 Common MON This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustec.

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein true and corn FOR SECRETARY OF STATE USE ONLY WK4C RI0015-001 8