



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
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PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2011

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.

1. Corporate ID No. 000559542		2. Name of Corporation CONTRACT CALLERS, INC			
3. Street Address Principal Business Office 1058 CLAUSSEN RD SUITE 110			City AUGUSTA	State GA	Zip 30907
4. Business Phone No. 706-868-5188		5. State of Incorporation GEORGIA			
6. Brief Description of the Character of Business Conducted in Rhode Island DEBT COLLECTIONS OR FIELD SERVICES					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name WILLIAM T WERTZ			Vice President Name		
Street Address 1058 CLAUSSEN RD SUITE 110			Street Address		
City AUGUSTA	State GA	Zip 30907	City	State	Zip
Secretary Name PAUL SQUIRES			Treasurer Name		
Street Address 1320 CENTRE ST SUITE 200			Street Address		
City NEWTON CENTER	State MA	Zip 02459	City	State	Zip
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name WILLIAM T WERTZ			Director Name		
Street Address 1058 CLAUSSEN RD SUITE 110			Street Address		
City AUGUSTA	State GA	Zip 30907	City	State	Zip
Director Name PAUL SQUIRES			Director Name		
Street Address 1320 CENTRE ST SUITE 200			Street Address		
City NEWTON CENTER	State MA	Zip 02459	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION MUST BE COMPLETED		
			Number of Shares 100,000	Class/Series COMMON	Par Value 1.00

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 trustee.

FILED

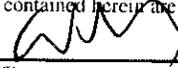
File Date **FEB 25 2011**

Check No. **By MNC**

By: **5002**

FOR SECRETARY OF STATE USE ONLY

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 are true and correct.


Signature **WILLIAM T WERTZ**
Date **2/25/11**
Print or Type Name
PRESIDENT
Title