



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

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2011

1. ID No. 000122566

2. Exact Name of the Limited Liability Company XEROX CAPITAL SERVICES, LLC

3. State of Formation

State: DE

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

TO PROVIDE BACK OFFICE SUPPORT TO XEROX CORPORATION'S US BASED BUSINESS AND TO ADMINISTER XEROX CORPORATION'S US BASED EQUIPMENT-LEASING BUSINESS

5. Principal Office Address

No. and Street: XEROX SQUARE 100 CLINTON AVE
SOUTH XRX2-029

City or Town: ROCHESTER

State: NY Zip: 14644-1877 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 45 GLOVER AVENUE

City or Town: NORWALK

State: CT

Zip: 06850

Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	RHONDA L. SEEGAL	45 GLOVER AVENUE NORWALK, CT 06850 USA
MANAGER	ANN D PETTRONE	45 GLOVER AVE NORWALK, CT 06850 USA
MANAGER	JOHN F. RIVERA	45 GLOVER AVE NORWALK, CT 06850 USA
MANAGER	MARK SHEIVACHMAN	45 GLOVER AVENUE NORWALK, CT 06850 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888-

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 20 Day of April, 2011 at 1:57:41 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By MARK SHEIVACHMAN, ASSISTANT SECRETARY
Signature of Authorized Person

Form No. 632
Revised 09/07