



**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. 000522692

2. Exact Name of the Limited Liability Company WFG Lender Services, LLC.

3. State of Formation

State: MN

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

title insurance and related services

5. Principal Office Address

No. and Street: 340 OSWEGO PT DR
SUITE 100

City or Town: LAKE OSWEGO State: OR Zip: 97034 Country: USA

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

Contact Name: Contact Title: ATTN PARALEGAL

No. and Street: 340 OSWEGO PT DR
SUITE 100

City or Town: LAKE OSWEGO State: OR Zip: 97034 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	JAMES WILLIAM MOODY	6100 TENNYSON PARKWAY STE 100 PLANO, TX 75024 USA
MANAGER	DANIEL GAUDREAU	6100 TENNYSON PARKWAY STE 100 PLANO, TX 75024 USA
MANAGER	PATRICK STONE	340 OSWEGO PT DR STE 100 LAKE OSWEGO, OR 97034 USA
MANAGER	JOE MCCABE	340 OSWEGO PT DR STE 100 LAKE OSWEGO, OR 97034 USA
MANAGER	MIKE GALLAHER	340 OSWEGO PT DR STE 100 LAKE OSWEGO, OR 97034 USA

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

CT CORPORATION SYSTEM 10 WEYBOSSET STREET PROVIDENCE , RI 02903

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

Signed this 19 Day of October, 2011 at 12:23:12 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 JOE MCCABE
Signature of Authorized Person

Form No. 632
Revised 09/07

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