



**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

**Foreign Business Corporation
Annual Report**

Filing Period: January 1 - March 1

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.

ANNUAL REPORT YEAR: 2015

1. Corporate ID No. 000061655

2. Name of Corporation RECOVERY SERVICES INTERNATIONAL, INC.

3. Street Address Principal Business Office:

No. and Street: 436 WALNUT STREET

City or Town: PHILADELPHIA

State: PA

Zip: 19106

Country: USA

4. Business Phone No.

2156401000

5. State of Incorporation

State: DE

6. Brief Description of the Character of Business Conducted in Rhode Island

PREMIUM COLLECTION AND OTHER RECOVERY SERVICES

7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
TREASURER	JOSEPH J. JORDAN	436 WALNUT STREET PHILADELPHIA, PA 19106 USA
SECRETARY	JOHN J. FLEMING	436 WALNUT STREET PHILADELPHIA, PA 19106 USA
PRESIDENT	DAVID K PATTERSON	436 WALNUT STREET PHILADELPHIA, PA 19106- USA
ASSISTANT SECRETARY	JAMES T. FORD	436 WALNUT STREET PHILADELPHIA, PA 19106 USA
DIRECTOR	DAVID K PATTERSON	436 WALNUT STREET

		PHILADELPHIA, PA 19106 USA
DIRECTOR	GREGORY T. PENNELL	436 WALNUT STREET PHILADELPHIA, PA 19106 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per Share	Total Authorized Shares <i>Number of Shares</i>	Total Issued and Outstanding <i>Num of Shares</i>
CNP		\$0.0000	500.00	500

9. 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.

Signed this 19 Day of February, 2015 at 3:23:55 PM. *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 corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By JAMES T, FORD
Signature of Authorized Representative of the Corporation

This report cannot be accepted for filing if an officer has executed the form and he/she is not listed in section 7.

Form No. 630
Revised 09/07

© 2007 - 2015 State of Rhode Island and Providence Plantations
All Rights Reserved