



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2016
Limited Liability Company

- Filing period: September 1 - November 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 00846843		2. Exact name of the Limited Liability Company Healthcare Funding Solutions LLC	
3. NAICS Code 56 ☐		4. Brief description of the character of business conducted in Rhode Island <i>Passive Debt Buyer</i>	
5. State of Formation Colorado			
6. Principal Office Address 6300 S Syracuse Way, Suite 300		City Centennial	State CO
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Kathleen Panek		Contact Title Associate General Counsel	
Street Address PO Box 5980		City Denver	State CO
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name James Baker Richardson, Jr.		Manager Name	
Street Address 6300 S Syracuse Way, Suite 300		Street Address	
City Centennial	State CO	Zip 80111	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	
Check the box to indicate an attachment ☐			
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.			
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.			
Name of Authorized Person James Baker Richardson, Jr.		Date 3/15/17	
Signature of Authorized Person <i>[Signature]</i>		SIGN DOCUMENT HERE	

FILED

MAR 17 2017

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MAIL TO:
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