

# 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: 2014

1. Corporate ID No. 000127345

2. Name of Corporation VITAL RECOVERY SERVICES, INC

3. Street Address Principal Business Office:

No. and Street: 3795 DATA DRIVE, SUITE 200

City or Town: NORCROSS State: GA Zip: 30092 Country: USA

4. Business Phone No.

678-578-1020

5. State of Incorporation

State: GA

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

### **DEBT COLLECTIONS**

#### 7. Names and Addresses of the Officers and Directors:

All officers and directors must be listed.

| Title          | Individual Name             | Address   |  |
|----------------|-----------------------------|---|--|
|                | First, Middle, Last, Suffix | Address, City or Town, State, Zip Code, Country |  |
| PRESIDENT      | CHRISTOPHER J SHULER        | 3795 DATA DR STE 200<br>NORCROSS, GA 30092 USA  |  |
| VICE PRESIDENT | CHRISTOPHER J GUGALA        | 3795 DATA DR STE 200<br>NORCROSS, GA 30092 USA  |  |
| DIRECTOR       | STEVE DEEDY                 | 3795 DATA DR STE 200<br>NORCROSS, GA 30092 USA  |  |
| DIRECTOR       | JUSTIN DEEDY                | 3795 DATA DR STE 200<br>NORCROSS, GA 30092 USA  |  |
| DIRECTOR       | DAVE WAUGH                  | 3795 DATA DR STE 200                            |  |

|          |                   | NORCROSS, GA 30092 USA                         |
|----------|-------------------|--|
| DIRECTOR | CHRISTOPHER DEEDY | 3795 DATA DR STE 200<br>NORCROSS, GA 30092 USA |

#### 8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per Share | Total Authorized<br>Shares<br>Number of Shares | Total Issued<br>and<br>Outstanding<br>Num of<br>Shares |
|----------------|-----------------|---------------------|--|--|
| CNP            |                 | \$0.0000            | 10,000.00                                      | 10000  |

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 11 Day of February, 2014 at 3:17:18 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 CHRISTOPHER SHULER

Signature of Authorized Representative of the Corporation

## **PRESIDENT**

Title

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

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