

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000044355

FILED
May 01, 2010
Secretary of State

Entity Name: PREMIER/LUTGERT MORTGAGE, LLC

Current Principal Place of Business:

4200 GULF SHORE BLVD.
NAPLES, FL 34103

New Principal Place of Business:

Current Mailing Address:

4200 GULF SHORE BLVD.
NAPLES, FL 34103

New Mailing Address:

FEI Number: 65-1041752 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

ZUNDEL JR, ROBERT C
4001 TAMIAMI TRAIL NORTH, STE. 250
NAPLES, FL 34103 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: P
Name: HORNBECK, HUNTLEY JR
Address: 4200 GULF SHORE BLVD. N.
City-St-Zip: NAPLES, FL 34103

Title: MGRM
Name: LUTGERT, SCOTT F
Address: 4200 GULF SHORE BLVD. N.
City-St-Zip: NAPLES, FL 34103

Title: MGRM
Name: BENZA, STEPHEN
Address: 4200 GULF SHORE BLVD. N.
City-St-Zip: NAPLES, FL 34103

Title: MGRM
Name: WILLIAMS, MARCUS
Address: 4200 GULF SHORE BLVD. N.
City-St-Zip: NAPLES, FL 34103

Title: MGRM
Name: BAKER, RICHARD J
Address: 4200 GULF SHORE BLVD. N.
City-St-Zip: NAPLES, FL 34103

Title: MGRM
Name: GUTMAN, HOWARD B
Address: 4200 GULF SHORE BLVD. N.
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: HOWARD B GUTMAN

MGRM

05/01/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date