

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000003271

**FILED**  
**Apr 01, 2009**  
**Secretary of State**

**Entity Name:** 2ND CHANCE FINANCE L.L.C.

**Current Principal Place of Business:**

3239 CURRY WOODS CIR  
ORLANDO, FL 32822

**New Principal Place of Business:**

**Current Mailing Address:**

2ND CHANCE FINANCE  
P.O. BOX 721171  
ORLANDO, FL 32872 11

**New Mailing Address:**

**FEI Number:** 86-1155995

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RICCIARDO, ANTHONY M  
3239 CURRY WOODS CIR  
ORLANDO, FL 32822 US

**Name and Address of New Registered Agent:**

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: MGR ( ) Delete  
Name: RICCIARDO, ANTHONY M  
Address: 3239 CURRY WOODS CIR  
City-St-Zip: ORLANDO, FL 32822

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ANTHONY RICCIARDO

MGR

04/01/2009

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