

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000103341

**FILED  
Jan 19, 2012  
Secretary of State**

**Entity Name:** AMERIFIRST CAPITAL GROUP, LLC

**Current Principal Place of Business:**

449 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779

**New Principal Place of Business:**

**Current Mailing Address:**

449 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779

**New Mailing Address:**

FEI Number: 26-3760251

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MCGREGOR, DAVID A  
449 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779 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  
Name: MCGREGOR, DAVID A  
Address: 449 TWISTING PINE CIRCLE  
City-St-Zip: LONGWOOD, FL 32779

Title: MGRM  
Name: MCGREGOR, STEVEN H  
Address: 449 TWISTING PINE CIRCLE  
City-St-Zip: LONGWOOD, FL 32779

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: DAVID MCGREGOR

MGR

01/19/2012

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