

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000103341

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

**Current Principal Place of Business:**

449 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779

**Current Mailing Address:**

449 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779

**FEI Number:** 26-3760251

**Certificate of Status Desired:** No

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

MCGREGOR, DAVID A  
449 TWISTING PINE CIRCLE  
LONGWOOD, FL 32779 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGRM
Name	MCGREGOR, DAVID A	Name	MCGREGOR, STEVEN H
Address	449 TWISTING PINE CIRCLE	Address	449 TWISTING PINE CIRCLE
City-State-Zip:	LONGWOOD FL 32779	City-State-Zip:	LONGWOOD FL 32779

*I hereby certify that the information indicated on this report or supplemental 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; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** DAVID MCGREGOR

**MANAGER**

**02/05/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date