

# ANNUAL REPORT

DOCUMENT # L01000019900

1. Entity Name  
THE MEYER MORTGAGE GROUP, LLC



Principal Place of Business  
31211 AVENUE A, SUITE B  
BIG PINE KEY, FL 33043 US

Mailing Address  
4475 U.S. 1 SOUTH  
SUITE 106  
SAINT AUGUSTINE, FL 32086 US

May  
Se



**DO NOT WRITE IN THIS SPACE**

04302008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number  
65-1151588

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

MEYER, CHRISTOPHER J  
506 JULIETA CIRCLE  
SAINT AUGUSTINE, FL 32086

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

000000950981  
06/04/08-80013-015 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
MEYER, CHRISTOPHER  
506 JULIETA CIRCLE  
SAINT AUGUSTINE, FL 32086

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

CHRISTOPHER J. MEYER

4/30/08

(904) 794-6690

Date

Daytime Phone #