

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000005982

Entity Name: MARKETPLACE FINANCIAL, LLC

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

32801 US HWY 19 N., SUITE 100
PALM HARBOR, FL 34684

New Principal Place of Business:

Current Mailing Address:

32801 US HWY 19 N., SUITE 100
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 72-1547890

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MELENDEZ, MARGARET C
1733 KEUKA DRIVE, E302
NEW PORT RICHEY, FL 34655 US

Name and Address of New Registered Agent:

SORENSEN, HENRY T II
32815 US HWY 19 NORTH
PALM HARBOR, FL 34684 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: HENRY T SORENSEN II

04/27/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: BENNETI, ALVIN A JR
Address: 6506 DEBBIE LANE S.
City-St-Zip: ST PETERSBURG, FL 33707

Title: MGRM () Delete
Name: BENNETI, LIANE M
Address: 3412 GABLES CT
City-St-Zip: TAMPA, FL 33609

Title: MGRM () Delete
Name: WEHLAU, CHERYL L
Address: 3009 KENSINGTON TRACE
City-St-Zip: TARPON SPRINGS, FL 34688

Title: MGRM () Delete
Name: CRAVEN-MELENDEZ, MARGARET
Address: 32801 US HWY 19 N., SUITE 100
City-St-Zip: PALM HARBOR, FL 34684

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

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

Title: MGR (X) Change () Addition
Name: CRAVEN-MELENDEZ, MARGARET
Address: 32801 US HWY 19 N., SUITE 100
City-St-Zip: PALM HARBOR, FL 34684

Title: MGR () Change (X) Addition
Name: PUIDA, TERRENCE T II
Address: 3735 GOLDEN EAGLE DRIVE
City-St-Zip: LAND O' LAKES, FL 34639

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: EDMUND J OMAN

CFO

04/27/2005

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