03-04-2004 90022.029 ****50.00
L02000017420

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Oct 28, 2004 8:00 A.M.
Secretary of State

DOCUMENT # L02000017420

1. Entity Name
MORTGAGE FUNDERS INVESTMENT GROUP, LLC

Principal Place of Business	Mailing Address
8211 WEST BROWARD BLVD. SUITE PH1-FIFTH FLOOR PLANTATION, FL 33324	8211 WEST BROWARD BLVD. SUITE PH1-FIFTH FLOOR PLANTATION, FL 33324

02282004 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 42-1543674 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LACERTOSA, DOMENICK G 8211 W. BROWARD BLVD., PH1, 5TH FLOOR PLANTATION, FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00 Due by May 1, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR LACERTOSA, DOMENICK 3110 N 34 ST HOLLYWOOD, FL 33021	☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☒ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition
		☐ Delete		☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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: Domenick G. Lacertosa - Manager 12004-954562124 5
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #