

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000023626

Entity Name: FLORIDA HOME LENDING GROUP, LLC

FILED
Jan 31, 2006
Secretary of State

Current Principal Place of Business:

7777 131ST ST. N.
SUITE
SEMINOLE, FL 33776

New Principal Place of Business:

100 N. TAMPA ST.
SUITE 2100
TAMPA, FL 33602

Current Mailing Address:

7777 131ST ST. N.
SUITE 4
SEMINOLE, FL 33772

New Mailing Address:

100 N. TAMPA ST.
SUITE 2100
TAMPA, FL 33602

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAHAM, CASEY
11695 81ST PLACE N
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

GRAHAM, CASEY
100 N. TAMPA ST.
SUITE 2100
TAMPA, FL 33602 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:

01/31/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GRAHAM, CASEY P PRES
Address: 11695 81ST PLACE N.
City-St-Zip: SEMINOLE, FL 33772 US

Title: MGR () Delete
Name: EASTBURN, ALFRED VP
Address: 12516 EAGLES ENTRY DRIVE
City-St-Zip: ODESSA, FL 33556 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GRAHAM, CASEY P PRES
Address: 100 N. TAMPA ST. SUITE 2100
City-St-Zip: TAMPA, FL 33602 US

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: CASEY P. GRAHAM

PRES

01/31/2006

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