


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2005 08:00 AM
Secretary of State

DOCUMENT # L03000049615

1. Entity Name
 PROSPECT FINANCIAL LLC



Principal Place of Business _____ Mailing Address _____

12475 SW 58TH STREET 12475 SW 58TH STREET
 SW RANCHES, FL 33330 US SW RANCHES, FL 33330 US

DO NOT WRITE IN THIS SPACE



01052005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 20-0448382	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SAMUELSON, WALTER T
 12475 SW 58TH STREET
 SW RANCHES, FL 33330

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SAMUELSON, WALTER T
STREET ADDRESS	12475 SW 58TH STREET
CITY-ST-ZIP	SW RANCHES, FL 33330
TITLE	MGRM
NAME	SAMUELSON, LUANN M
STREET ADDRESS	12475 SW 58TH STREET
CITY-ST-ZIP	SW RANCHES, FL 33330
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Walter T Samuelson Date: 1/5/05

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