

**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 11, 2006 8:00 am**  
**Secretary of State**

04-11-2006 90015 015 \*\*\*\*50.00

20027886



01102006 No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-1191302	Applied For Not Applicable
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5. Certificate of Status Desired  \$5.00 Additional Fee Required

DOCUMENT # L04000029740  
 1. Entity Name  
 D & F COMMERCIAL LENDING FUND, LLC



Principal Place of Business *Suite 110* Mailing Address *Suite 110*  
 105 US HIGHWAY 301 SOUTH, SUITE E TAMPA, FL 33619  
 105 US HIGHWAY 301 SOUTH, SUITE E TAMPA, FL 33619

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  
 HARROW, ANDREW M  
 105 UNITED STATES HIGHWAY 301 SOUTH  
~~SUITE E~~ *Suite 110*  
 TAMPA, FL 33619

**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: *Andrew Harrow* DATE: *4/7/06*  
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, 2006**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	S HARROW, SUSAN 6504 SEA BIRD WAY APOLLO BEACH, FL 33572
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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]* DATE: *4-7-06*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #