

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000040109

Entity Name: HOME CREDIT GROUP, LLC

FILED
Aug 15, 2006
Secretary of State

Current Principal Place of Business:

2800 GLADES CIRCLE
114
WESTON, FL 33327 US

Current Mailing Address:

2800 GLADES CIRCLE
114
WESTON, FL 33327 US

New Principal Place of Business:

20515 EAST COUNTRY CLUB DRIVE
PH 45
AVENTURA, FL 33180 US

New Mailing Address:

20515 EAST COUNTRY CLUB DRIVE
PH 45
AVENTURA, FL 33180 US

FEI Number: 80-0105601 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GALEANO, DIANA
2800 GLADES CIRCLE
114
WESTON, FL 33327 US

Name and Address of New Registered Agent:

COY, PATRICIA
20515 EAST COUNTRY CLUB DRIVE
PH 45
AVENTURA, FL 33180 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: PATRICIA COY

08/15/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: KOROLYZEN, MARIA R
Address: 2800 GLADES CIRCLE #114
City-St-Zip: WESTON, FL 33327 US

Title: MGR () Delete
Name: GALEANO, DIANA
Address: 2800 GLADES CIRCLE #114
City-St-Zip: WESTON, FL 33327

ADDITIONS/CHANGES:

Title: MMGR (X) Change () Addition
Name: COY, PATRICIA
Address: 20515 EAST COUNTRY CLUB DRIVE
City-St-Zip: AVENTURA, FL 33180 US

Title: MMGR (X) Change () Addition
Name: RODIGUEZ, LIBIA
Address: 6097 FROGGATT STREET
City-St-Zip: ORLANDO, FL 32835

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: PATRICIA COY

MMGR

08/15/2006

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