## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000078182

Entity Name: 1ST UNITED FINANCIAL, PLC

FILED Jan 20, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

905 NE PRIMAVISTA BLVD 897C NE PRIMA VISTA BLVD. SUITE E PORT ST LUCIE, FL 34952

PORT ST LUCIE, FL 34952

Current Mailing Address: New Mailing Address:

905 NE PRIMAVISTA BLVD.
SUITE E PORT ST LUCIE, FL 34952
PORT ST LUCIE, FL 34952

FEI Number: 20-2089397 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SAN MARTIN, DAVID M
709 SW 15TH ST
OKEECHOBEE, FL 34974 US
SAN MARTIN, DAVID M
770 SE 25TH STREET
OKEECHOBEE, FL 34974 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: 01/20/2006

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition Name: SAN MARTIN, DAVID M Name: SAN MARTIN, DAVID M

Address: 709 SW 15TH ST Address: 770 SE 25TH STREET

City-St-Zip: OKEECHOBEE, FL 34974

City-St-Zip: OKEECHOBEE, FL 34974

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MCMULLEN, CURTIS R
 Name:

 Address:
 356 NW AIROSO BLVD
 Address:

 City-St-Zip:
 PORT ST LUCIE, FL 34983
 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: DAVID M SAN MARTIN MGRM 01/20/2006