2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2009
Secretary of State

DOCUMENT# L04000093450

Entity Name: FLORIDA RESIDENTIAL HOUSING GROUP LLC

Current Principal Place of Business:

3733 UNIVERSITY BOULEVARD WEST
SUITE 205
JACKSONVILLE, FL 32217

New Principal Place of Business:

12143 DIVIDING OAKS TRAIL EAST
JACKSONVILLE, FL 32223

Current Mailing Address:

3733 UNIVERSITY BOULEVARD WEST
SUITE 205
JACKSONVILLE, FL 32217

New Mailing Address:

P.O. BOX 56593
JACKSONVILLE, FL 32241

FEI Number: 20-2101897 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'LEARY, WILLIAM A
3733 UNIVERSITY BOULEVARD WEST
SUITE 205
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

O'LEARY, WILLIAM A
12143 DIVIDING OAKS TRAIL EAST
JACKSONVILLE, FL 32223 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: _____ 04/26/2009
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete
Name: O'LEARY, WILLIAM A
Address: 3733 UNIVERSITY BOULEVARD WEST, SUITE 205
City-St-Zip: JACKSONVILLE, FL 32217

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: WILLIAM A. O'LEARY, INC.
Address: P.O. BOX 56593
City-St-Zip: JACKSONVILLE, FL 32241

I hereby certify that the information supplied with this filing does not qualify 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: WILLIAM A. O'LEARY PRES 04/26/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date