

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000020763

**Entity Name:** LOANS OF FLORIDA, LLC

**FILED**  
**Mar 05, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1901 W. FAIRBANKS AVE.  
WINTER PARK, FL 32789 US

**New Principal Place of Business:**

**Current Mailing Address:**

1901 W. FAIRBANKS AVE.  
WINTER PARK, FL 32789 US

**New Mailing Address:**

**FEI Number:** 75-3209976

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ELEKMAN, LLOYD  
252 SPRINGSIDE RD  
LONGWOOD, FL 32779 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** ELEKMAN, SUZETTE  
**Address:** 252 SPRINGSIDE RD  
**City-St-Zip:** LONGWOOD, FL 32779

**Title:** MGRM  
**Name:** COOK, SHIRLEY  
**Address:** 636 LAKEWORTH CIR.  
**City-St-Zip:** HEATHROW, FL 32746

I hereby 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:** SHIRLEY COOK

MGRM

03/05/2010

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