

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000024573

Entity Name: THE BOFI GROUP LLC

FILED  
Apr 18, 2007  
Secretary of State

## Current Principal Place of Business:

15020 BRIDGEWAY LANE  
#405  
FT. MYERS, FL 33919 US

## New Principal Place of Business:

## Current Mailing Address:

15020 BRIDGEWAY LANE  
#405  
FT. MYERS, FL 33919 US

## New Mailing Address:

FEI Number: 35-2251457

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WHALEN, BRADLEY J  
15020 BRIDGEWAY LANE  
# 405  
FT. MYERS, FL 33919 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: MGR ( ) Delete  
Name: WHALEN, BRADLEY,  
Address: 15020 BRIDGEWAY LANE #405  
City-St-Zip: FT. MYERS, FL 33919 US

Title: MGRM ( ) Delete  
Name: DEWERFF, CHRISTINA L  
Address: 15020 BRIDGEWAY LANE #405  
City-St-Zip: FT. MYERS, FL 33919 US

Title: MGRM ( ) Delete  
Name: WHALEN, WILLIAM E  
Address: 64 4TH ST.  
City-St-Zip: BONITA SPRINGS, FL 34134 US

Title: MGRM ( ) Delete  
Name: STAHL, DOUGLAS R  
Address: 220 SUMMIT BLVD #162  
City-St-Zip: BROOMFIELD, CO 80021 US

Title: MGRM ( ) Delete  
Name: WHALEN, JAMES W  
Address: 28349 E. 6TH ROAD  
City-St-Zip: FARMERSVILLE, IL 62533 US

Title: MGRM ( ) Delete  
Name: NEILA J. JORDAN LIVI, NG TRUST  
Address: 30040 E. 8TH ROAD  
City-St-Zip: MORRISONVILLE, IL 63546 US

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: BRADLEY JAMES WHALEN

MR.

04/18/2007

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