

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000067957

FILED  
Apr 30, 2008  
Secretary of State

Entity Name: SPRUCE CREEK HOME LOANS, LLC

## Current Principal Place of Business:

435 S. RIDGEWOOD AVENUE  
SUITE 103  
DAYTONA BEACH, FL 32114 US

## New Principal Place of Business:

4359 ROCKY RIDGE PLACE  
SANFORD, FL 32773 US

## Current Mailing Address:

435 S. RIDGEWOOD AVENUE  
SUITE 103  
DAYTONA BEACH, FL 32114 US

## New Mailing Address:

4359 ROCKY RIDGE PLACE  
SANFORD, FL 32773 US

FEI Number: 20-3206261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

YETMAN, ROBERT G JR.  
435 S. RIDGEWOOD AVENUE  
SUITE 103  
DAYTONA BEACH, FL 32114 US

## Name and Address of New Registered Agent:

YETMAN, ROBERT G JR.  
4359 ROCKY RIDGE PLACE  
SANFORD, FL 32773 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:

04/30/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: YETMAN, ROBERT G JR.  
Address: 435 S. RIDGEWOOD AVENUE, SUITE 103  
City-St-Zip: DAYTONA BEACH, FL 32114 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: YETMAN, ROBERT G JR.  
Address: 4359 ROCKY RIDGE PLACE  
City-St-Zip: SANFORD, FL 32773 US

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: ROBERT G YETMAN JR

MGRM

04/30/2008

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