

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000077276

FILED
Mar 26, 2009
Secretary of State

Entity Name: FLORIDA HERITAGE LENDING GROUP LLC

Current Principal Place of Business:

3636 DEL PRADO BOULEVARD SOUTH
CAPE CORAL, FL 33904

New Principal Place of Business:

4719 SW 25 COURT
CAPE CORAL, FL 33914

Current Mailing Address:

3636 DEL PRADO BOULEVARD SOUTH
CAPE CORAL, FL 33904

New Mailing Address:

4719 SW 25 COURT
CAPE CORAL, FL 33914

FEI Number: 02-0767095

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUTIERREZ, ORESTES L
3636 DEL PRADO BLVD
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

GUTIERREZ, ORESTES L
4719 SW 25TH COURT
CAPE CORAL, FL 33914 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: LAZARO O GUTIERREZ

03/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: NORAIMA, ARTILES
Address: 3636 DEL PRADO BLVD
City-St-Zip: CAPE CORAL, FL 33904

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: DELIA, DELGADO
Address: 4719 SW 25TH COURT
City-St-Zip: CAPE CORAL, FL 33914

Title: MGRM () Change (X) Addition
Name: LISSETTE, GUTIERREZ
Address: 4719 SW 25TH COURT
City-St-Zip: CAPE CORAL, FL 33914

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: NORAIMA ARTILES

MGRM

03/26/2009

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