

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000022351

FILED
Mar 23, 2009
Secretary of State

Entity Name: FORECLOSURE SURPLUS REFUND GROUP, L.L.C.

Current Principal Place of Business:

175 FREDERICA AVE. NW
PALM BAY, FL 32907

New Principal Place of Business:

175 FRECERICA AVE NW
PALM BAY, FL 32911

Current Mailing Address:

175 FREDERICA AVE. NW
PALM BAY, FL 32907

New Mailing Address:

PO BOX 111406
PALM BAY, FL 32911

FEI Number: 20-4406908

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PETITE, SUZANNE
175 FREDERICA AVE. NW
PALM BAY, FL 32907 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 () Delete
Name: PETITE, SUZANNE
Address: 175 FREDERICA AVE NW
City-St-Zip: PALM BAY, FL 32907

Title: M () Delete
Name: PETITE, MICHAEL
Address: 175 FREDERICA AVE NW
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES:

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

Title: MGMB (X) Change () Addition
Name: PETITE, MICHAEL
Address: 175 FREDERICA AVE NW
City-St-Zip: PALM BAY, FL 32907

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: MICHAEL PETITE

MGMB

03/23/2009

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