

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000070676

Entity Name: SIGMA FUNDING, LLC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

1348 FRUITVILLE RD., SUITE 202  
SARASOTA, FL 34236

**New Principal Place of Business:**

1348 FRUITVILLE RD.  
SUITE 202  
SARASOTA, FL 34236

**Current Mailing Address:**

1348 FRUITVILLE RD., SUITE 202  
SARASOTA, FL 34236

**New Mailing Address:**

1348 FRUITVILLE RD.  
SUITE 202  
SARASOTA, FL 34236

FEI Number: 51-0595609

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WITTMER, STEVEN T  
2014 4TH ST.  
SARASOTA, FL 34237 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: WITTMER, STEVEN T  
Address: 2014 4TH ST.  
City-St-Zip: SARASOTA, FL 34237

Title: MGRM  
Name: MCNELIS, MICHAEL  
Address: 1348 FRUITVILLE RD.  
City-St-Zip: SARASOTA, FL 34237

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: MICHAEL MCNELIS

MGRM

04/30/2010

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