2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000097484

Entity Name: CAPITAL FINDERS LLC

FILED Apr 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7309 VIA LURIA 8927 HYPOLUXO RD. LAKE WORTH, FL 33467 STE A4 - PMB 211

LAKE WORTH, FL 33467

Current Mailing Address: New Mailing Address:

8927 #A4 HYPOLUXO ROAD
PMB 211
LAKE WORTH, FL 33467

8927 HYPOLUXO ROAD
STE. A4 - PMB 211
LAKE WORTH, FL 33467

FEI Number: 20-5651970 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FRANCO, MICHAEL
7309 VIA LURIA
LAKE WORTH, FL 33467 US
FRANCO, MICHAEL
8927 HYPOLUXO RD. STE. A4
PMB 211
LAKE WORTH, FL 33467 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: MICHAEL FRANCO 04/09/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MR. () Delete Title: MR. (X) Change () Addition Name: FRANCO, MICHAEL Name: FRANCO, MICHAEL

Address: 8927 HYPOLUXO RD STE A4 - PMB211 Address: 8927 HYPOLUXO RD STE A4 - PMB211

City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467 US

Title: () Delete Title: MR. () Change (X) Addition Name: Name: THOMAS, LOUGHLIN MBA Address: Address: Address: City-St-Zip: City-St-Zip: WEST CHESTER, PA 19382 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: MICHAEL FRANCO DIR 04/09/2008