2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000099044

1. Entity Name

VERO BEACH FAMILY MORTGAGE, LLC



Principal Place of Business

2901 OCEAN DRIVE VERO BEACH, FL 32963 Mailing Address

2901 OCEAN DRIVE VERO BEACH, FL 32963 FILED Jan 07, 2008 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

01032008 No Chg-LLC CR2E083 (12/07)

| 4. FEI Number | | Applied For |
|-------------------------------|-------|-----------------------------------|
| 20-5797678 | | Not Applicable |
| 5. Certificate of Status Desi | red 🔲 | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

COLLINS, GEORGE G JR. 756 BEACHLAND BOULEVARD VERO BEACH, FL 32963

DO NOT WRITE IN THIS SPACE

| The above named entity submits this statement for the purpose of chan the obligations of registered agent. | ging its registered office or registered agent, or both | i, in the State of Florida. | I am familiar with, and acce |
|--|---|-----------------------------|------------------------------|
| SIGNATURE Specific Need or or highly pages of projectived arrival and title if applicable | (NOTE Renistered Agent signature required whom reinstatura) | | DATE |

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

000000775725 01/08/08-80041-001 138.75

| 9. | MANAGING MEMBERS/MANAGERS | |
|--|---|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | MGRM ALEX, MACWILLIAM III 2901 OCEAN DRIVE VERO BEACH, FL 32963 | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ·i | |
| NAME STREET ADDRESS CITY-ST-ZIP | continue that the information supplies 17th this filips does not suplify for the even | emptions contained in Chapter 119. Florida Statutes. I further certify that the information |

11. I nereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and appropriate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

MGRM

1-3-08

772 231 6509

Daytime Phone #