

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000104894

FILED
Mar 27, 2009
Secretary of State

Entity Name: CAPITAL GROUP FINANCE, LLC

Current Principal Place of Business:

4839 SW 148 AVENUE
SUITE 311
DAVIE, FL 33330

New Principal Place of Business:

4875 VOLUNTEER ROAD
SUITE 100
SW RANCHES, FL 33330

Current Mailing Address:

4839 SW 148 AVENUE
SUITE 311
DAVIE, FL 33330

New Mailing Address:

4875 VOLUNTEER ROAD
SUITE 100
SW RANCHES, FL 33330

FEI Number: 20-5785376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTRO, BARBARA R
4839 SW 148 AVENUE
SUITE 311
DAVIE, FL 33330 US

Name and Address of New Registered Agent:

CASTRO, BARBARA R
4875 VOLUNTEER ROAD
SUITE 100
SW RANCHES, FL 33330 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:

03/27/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: CRAWFORD, ALBERT
Address: 4839 SW 148 AVENUE #311
City-St-Zip: DAVIE, FL 33330

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: CRAWFORD, ALBERT
Address: 4875 VOLUNTEER ROAD #100
City-St-Zip: SW RANCHES, FL 33330

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: DARCY NILAND

ACCT

03/27/2009

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