

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116363

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** BENEFACOR MORTGAGE COMPANY LLC

**Current Principal Place of Business:**

6727 1ST AVE SOUTH  
SUITE 106  
SAINT PETERSBURG, FL 33707

**New Principal Place of Business:**

**Current Mailing Address:**

6727 1ST AVE SOUTH  
SUITE 106  
SAINT PETERSBURG, FL 33707

**New Mailing Address:**

P.O. BOX 4073  
SAINT PETERSBURG, FL 33731

FEI Number: 20-5988259

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ADAMS, PETER  
223 79TH STREET SOUTH  
SAINT PETERSBURG, FL 33707 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: KENNEDY, TIMOTHY C  
Address: 1100 NORTH SHORE DR NE #107  
City-St-Zip: ST. PETERSBURG, FL 33701

Title: MGRM  
Name: ADAMS, PETER  
Address: 223 79TH STREET SOUTH  
City-St-Zip: ST. PETERSBURG, FL 33707

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: TIMOTHY C. KENNEDY

PRES

04/24/2012

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