

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000014280

**FILED**  
**Apr 29, 2010**  
**Secretary of State**

**Entity Name:** ANCHOR LENDING GROUP, LLC

**Current Principal Place of Business:**

4005 DEL PRADO BLVD.  
SUITE B  
CAPE CORAL, FL 33904 US

**New Principal Place of Business:**

**Current Mailing Address:**

4005 DEL PRADO BLVD.  
SUITE B  
CAPE CORAL, FL 33904 US

**New Mailing Address:**

**FEI Number:** 26-1972764      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

MCDONALD, MICHAEL  
1620 MAIN STREET  
11  
SARASOTA, FL 34236 US

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

LOCKARD, GREGORY O  
2655 AMBER LAKE DR.  
CAPE CORAL, FL 33909 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: GREGORY O. LOCKARD

04/29/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** LOCKARD, GREGORY O  
**Address:** 2655 AMBER LAKE DRIVE  
**City-St-Zip:** CAPE CORAL, FL 33909 US

**Title:** MEMB  
**Name:** PETERANGELO, TOM  
**Address:** 761 MIAMISBURG-CENTERVILLE ROAD  
**City-St-Zip:** CENTERVILLE, OH 45459 US

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: GREGORY O. LOCKARD

PRES

04/29/2010

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