2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000103528

CENTURION, ANDRES

CORAL GABELS, FL 33134

5450 SW 8TH STREET, SUITE 202

Name:

Address:

City-St-Zip:

Entity Name: NEW HORIZON MORTGAGE GROUP, LLC

FILED Apr 28, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 18 SPOKANE ROAD 18 SPOKANE ALBRIGHTSVILLE, PA 18210 ALBRIGHTSVILLE, PA 18210 **Current Mailing Address: New Mailing Address:** P.O. BOX 14 PO BOX 2664 ALBRIGHTSVILLE, PA 18210 LAND O LAKES, FL 34639 FEI Number: 20-4842562 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: GONZALEZ, DAVE 4116 MARCHMONT BLVD LAND O LAKES, FL 34638 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete GONZALEZ, DAVE Name: Name: 4116 MARCHMONT BLVD Address: Address: City-St-Zip: LAND O LAKES, FL 34638 City-St-Zip: Title: MGR () Delete Title: () Change () Addition Name: GONZALEZ, OYLEVE Name: Address: 151 RANCHLAND Address: City-St-Zip: BUSHKILL, PA 18324 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition PERAZA, NOEL Name: Name: Address: 2003 NW 208TH TERR. Address: City-St-Zip: PEMBROKE PINES, FL 33029 City-St-Zip: Title: MGRM (X) Delete Title: () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: DAVE GONZALEZ VP 04/28/2008