

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000016220

FILED  
Apr 09, 2010  
Secretary of State

**Entity Name:** CREDIT RESTORATION FOUNDATION LLC

**Current Principal Place of Business:**

2131 N MAGNOLIA AVE  
SUITE 102  
OCALA, FL 34475

**New Principal Place of Business:**

3217 NE 22ND COURT  
OCALA, FL 34479

**Current Mailing Address:**

3217 N.E. 22ND COURT  
OCALA, FL 34479

**New Mailing Address:**

3217 NE 22ND COURT  
OCALA, FL 34479

**FEI Number:** 26-1953775

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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:** GAWLICK, JEAN M  
**Address:** 3217 N.E. 22ND COURT  
**City-St-Zip:** Ocala, FL 34479

**Title:** MGR  
**Name:** GAWLICK, KELLY J  
**Address:** 3217 N.E. 22ND COURT  
**City-St-Zip:** Ocala, FL 34479

**Title:** S  
**Name:** GAWLICK, JEAN M  
**Address:** 3217 N.E. 22ND COURT  
**City-St-Zip:** Ocala, FL 34479

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:** JEAN GAWLICK

MGRM

04/09/2010

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