

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000032967

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: UNITED BUSINESS FINANCIAL, LLC.

**Current Principal Place of Business:**

6625 MIAMI LAKES DRIVE, SUITE 412  
MIAMI LAKES, FL 33014

**New Principal Place of Business:**

**Current Mailing Address:**

6625 MIAMI LAKES DRIVE, SUITE 412  
MIAMI LAKES, FL 33014

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

WRIGHT, ANTRON  
17033 S. DIXIE HWY.-SUITE A  
MIAMI, FL 33157 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: MGR ( ) Delete  
Name: WRIGHT, ANTRON  
Address: 6625 MIAMI LAKES DRIVE, SUITE 412  
City-St-Zip: MIAMI LAKES, FL 33014

Title: MGRM ( ) Delete  
Name: FERGUSON, DANA  
Address: 6625 MIAMI LAKES DRIVE, SUITE 412  
City-St-Zip: MIAMI LAKES, FL 33014

Title: D ( ) Delete  
Name: FERGUSON, TRACI  
Address: 5980 DEXTER COURT  
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete  
Name: FERGUSON, RHADI  
Address: 5980 DEXTER COURT  
City-St-Zip: TITUSVILLE, FL 32780

Title: D ( ) Delete  
Name: FERGUSON, RUFUS  
Address: 5980 DEXTER COURT  
City-St-Zip: TITUSVILLE, FL 32780

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: ANTRON WRIGHT

MGR

04/30/2009

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