2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000033370

Entity Name: KJE LENDING, LLC

FILED Apr 10, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3225 SOUTHSIDE BLVD., STE. 2 JACKSONVILLE, FL 32216 3225 SOUTHSIDE BLVD., STE. 2 JACKSONVILLE, FL 32216 US

Current Mailing Address: New Mailing Address:

3225 SOUTHSIDE BLVD., STE. 2 PO BOX 17156

JACKSONVILLE, FL 32216 JACKSONVILLE, FL 322457156 US

FEI Number: 26-2447756 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:

SMITH HULSEY & BUSEY, P.A.

225 WATER STREET, STE. 1800

JACKSONVILLE, FL 32202

US

DURDEN, MARY S VP

3225 SOUTHSIDE BOULEVARD, SUITE 2

JACKSONVILLE, FL 32216

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: MARY S. DURDEN 04/10/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: () Delete Title: P () Change (X) Addition Name: JENNISON, ELIZABETH K PRES. Address: Address: Address: 3225 SOUTHSIDE BLVD., SUITE #2 City-St-Zip: JACKSONVILLE, FL 32216

 Title:
 () Delete
 Title:
 ST () Change (X) Addition

 Name:
 Name:
 JENNISON, CAROLINE K ST

 Address:
 Address:
 3225 SOUTHSIDE BLVD., SUITE #2

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE, FL 32216

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: CAROLINE K. JENNISON ST 04/10/2009